

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
05 01 2013

through

M M M / D D D / Y Y Y Y Y Y  
05 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
06 19 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
05 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
05 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">50461.20</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">12183.20</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">36913.87</span>	<span style="border: 1px solid black; padding: 2px;">127396.79</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">49097.07</span>	<span style="border: 1px solid black; padding: 2px;">177857.99</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">17138.10</span>	<span style="border: 1px solid black; padding: 2px;">145899.02</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">31958.97</span>	<span style="border: 1px solid black; padding: 2px;">31958.97</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
05 01 2013

To:

M M / D D / Y Y Y Y Y  
05 31 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

30942.55

68048.38

(ii) Unitemized .....

5971.32

59348.41

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

36913.87

127396.79

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

36913.87

127396.79

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

36913.87

127396.79

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

36913.87

127396.79

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	138.10	589.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	138.10	589.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	124500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	2000.00	20810.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17138.10	145899.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17138.10	145899.02

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	36913.87	127396.79
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36913.87	127396.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	138.10	589.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	138.10	589.02

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.22

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847884

Amount of Each Receipt this Period

23.14

Full Name (Last, First, Middle Initial)

**B. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.36

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902300

Amount of Each Receipt this Period

23.14

Full Name (Last, First, Middle Initial)

**C. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932756

Amount of Each Receipt this Period

23.14

SUBTOTAL of Receipts This Page (optional)..... ►

69.42

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ERNEST D ADAMS**

Mailing Address P O Box 105

City  
GrayslakeState  
ILZip Code  
60030FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.68

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902095

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

**B. ERNEST D ADAMS**

Mailing Address P O Box 105

City  
GrayslakeState  
ILZip Code  
60030FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.56

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932552

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

**C. JOHN P BADER**

Mailing Address 438 MITCHELL DRIVE

City  
GRAYS LAKEState  
ILZip Code  
60030FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery &amp; Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.35

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847601

Amount of Each Receipt this Period

81.15

SUBTOTAL of Receipts This Page (optional)..... ►

122.91

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code  
 GRAYS LAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery &amp; Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902017

Amount of Each Receipt this Period

81.15

Full Name (Last, First, Middle Initial)

B. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code  
 GRAYS LAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery &amp; Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

892.65

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932474

Amount of Each Receipt this Period

81.15

Full Name (Last, First, Middle Initial)

C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code  
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847602

Amount of Each Receipt this Period

22.75

SUBTOTAL of Receipts This Page (optional)..... ►

185.05

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DENIS BAILEY**

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code  
 Scottsdale AZ 85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.98

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902018**

Amount of Each Receipt this Period

22.75

Full Name (Last, First, Middle Initial)

## **B. DENIS BAILEY**

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code  
 Scottsdale AZ 85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.73

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932475**

Amount of Each Receipt this Period

22.75

Full Name (Last, First, Middle Initial)

## **C. Donald J Bailey**

Mailing Address 27 Kitchell Road

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PRES-EB-Emerging Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.22

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847909**

Amount of Each Receipt this Period

122.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

167.81

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Donald J Bailey

Mailing Address 27 Kitchell Road

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PRES-EB-Emerging Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902325

Amount of Each Receipt this Period

122.31

Full Name (Last, First, Middle Initial)

B. Donald J Bailey

Mailing Address 27 Kitchell Road

City State Zip Code  
 Morristown NJ 07960

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PRES-EB-Emerging Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1329.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932780

Amount of Each Receipt this Period

122.31

Full Name (Last, First, Middle Initial)

C. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City State Zip Code  
 Chicago IL 60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847813

Amount of Each Receipt this Period

31.20

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.59

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902228**

Amount of Each Receipt this Period

31.20

Full Name (Last, First, Middle Initial)

**B. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City

Chicago

State

IL

Zip Code

60626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

338.79

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932684**

Amount of Each Receipt this Period

31.20

Full Name (Last, First, Middle Initial)

**C. GREGORY P BALDWIN**

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

364.41

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847803**

Amount of Each Receipt this Period

41.04

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.45

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902218

Amount of Each Receipt this Period

41.04

Full Name (Last, First, Middle Initial)

B. GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.49

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932674

Amount of Each Receipt this Period

41.04

Full Name (Last, First, Middle Initial)

C. WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City State Zip Code  
Skillman NJ 08558

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.59

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847650

Amount of Each Receipt this Period

37.32

SUBTOTAL of Receipts This Page (optional)..... ►

119.40

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM P BALLINGER**

Mailing Address 25 Blue Heron Way

City

State

Zip Code

Skillman

NJ

08558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

369.91

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902066

Amount of Each Receipt this Period

37.32

Full Name (Last, First, Middle Initial)

**B. WILLIAM P BALLINGER**

Mailing Address 25 Blue Heron Way

City

State

Zip Code

Skillman

NJ

08558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

407.23

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932523

Amount of Each Receipt this Period

37.32

Full Name (Last, First, Middle Initial)

**C. PHILLIP W BANET**

Mailing Address 4589 JADE LANE

City

State

Zip Code

HOFFMAN ESTATES

IL

60192

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

Senior Actuary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

349.65

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847685

Amount of Each Receipt this Period

39.14

**SUBTOTAL** of Receipts This Page (optional)..... ►

113.78

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code  
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.79

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902101

Amount of Each Receipt this Period

39.14

Full Name (Last, First, Middle Initial)

B. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code  
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.93

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932558

Amount of Each Receipt this Period

39.14

Full Name (Last, First, Middle Initial)

C. ROBERT H BARGE III III

Mailing Address 2222 LOCH WAY

City State Zip Code  
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.98

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847882

Amount of Each Receipt this Period

79.94

SUBTOTAL of Receipts This Page (optional)..... ►

158.22

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT H BARGE III III**

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.92

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902298**

Amount of Each Receipt this Period

79.94

Full Name (Last, First, Middle Initial)

**B. ROBERT H BARGE III III**

Mailing Address 2222 LOCH WAY

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.86

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932754**

Amount of Each Receipt this Period

79.94

Full Name (Last, First, Middle Initial)

**C. KIMBERLEY M BARTOS**

Mailing Address 2425 201st St SE

City

Bothell

State

WA

Zip Code

98012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2901420**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

409.88

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.04

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847613**

Amount of Each Receipt this Period

29.43

Full Name (Last, First, Middle Initial)

**B. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.47

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-290209**

Amount of Each Receipt this Period

29.43

Full Name (Last, First, Middle Initial)

**C. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.90

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932486**

Amount of Each Receipt this Period

29.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.29

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.98

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902134**

Amount of Each Receipt this Period

22.41

Full Name (Last, First, Middle Initial)

**B. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.39

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932591**

Amount of Each Receipt this Period

22.41

Full Name (Last, First, Middle Initial)

**C. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.82

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847772**

Amount of Each Receipt this Period

36.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.05

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902187

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

**B. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.28

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932644

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

**C. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City State Zip Code  
 GLENCOE IL 60022

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.36

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847628

Amount of Each Receipt this Period

42.46

SUBTOTAL of Receipts This Page (optional)..... ►

114.92

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City

GLENCOE

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.82

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902044

Amount of Each Receipt this Period

42.46

Full Name (Last, First, Middle Initial)

**B. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City

GLENCOE

State

IL

Zip Code

60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.28

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932501

Amount of Each Receipt this Period

42.46

Full Name (Last, First, Middle Initial)

**C. ROBERT W BIRMAN**

Mailing Address 7533 WHITLOCK PLACE

City

LINCOLN

State

NE

Zip Code

68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.92

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932648

Amount of Each Receipt this Period

19.09

**SUBTOTAL** of Receipts This Page (optional)..... ►

104.01

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT L BLOCK**

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Investor Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.63

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847831**

Amount of Each Receipt this Period

67.12

Full Name (Last, First, Middle Initial)

**B. ROBERT L BLOCK**

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Investor Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.75

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902246**

Amount of Each Receipt this Period

67.12

Full Name (Last, First, Middle Initial)

**C. ROBERT L BLOCK**

Mailing Address 398 Brookmont Lane

City

North Barrington

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Investor Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.87

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932702**

Amount of Each Receipt this Period

67.12

**SUBTOTAL** of Receipts This Page (optional)..... ►

201.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DOUGLAS L BORG**

Mailing Address 2160 Red Setter Road

City State Zip Code  
 Rocklin CA 95765

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847880

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

**B. DOUGLAS L BORG**

Mailing Address 2160 Red Setter Road

City State Zip Code  
 Rocklin CA 95765

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902296

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

**C. DOUGLAS L BORG**

Mailing Address 2160 Red Setter Road

City State Zip Code  
 Rocklin CA 95765

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932752

Amount of Each Receipt this Period

33.49

SUBTOTAL of Receipts This Page (optional)..... ►

100.47

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.50

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847717**

Amount of Each Receipt this Period

23.05

Full Name (Last, First, Middle Initial)

**B. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.55

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902133**

Amount of Each Receipt this Period

23.05

Full Name (Last, First, Middle Initial)

**C. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City

ARLINGTON HTS

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.60

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932590**

Amount of Each Receipt this Period

23.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.15

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.66

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847864**

Amount of Each Receipt this Period

37.25

Full Name (Last, First, Middle Initial)

## **B. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.91

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902279**

Amount of Each Receipt this Period

37.25

Full Name (Last, First, Middle Initial)

## **C. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.16

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932735**

Amount of Each Receipt this Period

37.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

111.75



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Encompass Field Sa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.34

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847841**

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

## **B. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Encompass Field Sa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.21

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902256**

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

## **C. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Encompass Field Sa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932712**

Amount of Each Receipt this Period

22.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

68.61

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.45

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902058**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

## **B. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.29

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932515**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

## **C. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
 FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.31

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847659**

Amount of Each Receipt this Period

39.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.10

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.73

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902075**

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

## **B. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.15

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932532**

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

## **C. BETH A BROWN**

Mailing Address 2637 W. WILSON AVE.

City State Zip Code  
CHICAGO IL 60625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.86

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902106**

Amount of Each Receipt this Period

21.52

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BETH A BROWN**

Mailing Address 2637 W. WILSON AVE.

City  
CHICAGO

State Zip Code  
IL 60625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.38

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932563**

Amount of Each Receipt this Period

21.52

Full Name (Last, First, Middle Initial)

## **B. MICHAEL E BROWN**

Mailing Address 4419 Northside Pkwy

City  
Atlanta

State Zip Code  
GA 30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Field EB Sls Ldr-Bus Ins

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932502**

Amount of Each Receipt this Period

19.80

Full Name (Last, First, Middle Initial)

## **C. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City  
LONG GROVE

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902221**

Amount of Each Receipt this Period

20.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City State Zip Code  
 LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932677

Amount of Each Receipt this Period

20.59

Full Name (Last, First, Middle Initial)

**B. CATHERINE S BRUNE**

Mailing Address 190 SAVANNA CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1696.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847664

Amount of Each Receipt this Period

188.46

Full Name (Last, First, Middle Initial)

**C. CATHERINE S BRUNE**

Mailing Address 190 SAVANNA CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1884.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902080

Amount of Each Receipt this Period

188.46

SUBTOTAL of Receipts This Page (optional)..... ►

397.51

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 229  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CATHERINE S BRUNE**

Mailing Address 190 SAVANNA CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2073.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	3		

**Transaction ID : A2013-2932537**

Amount of Each Receipt this Period

188.46

Full Name (Last, First, Middle Initial)

**B. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

351.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	3		2	0	1	3		

**Transaction ID : A2013-847724**

Amount of Each Receipt this Period

39.48

Full Name (Last, First, Middle Initial)

**C. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City

BERWYN

State

IL

Zip Code

60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

391.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	7		2	0	1	3		

**Transaction ID : A2013-2902140**

Amount of Each Receipt this Period

39.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

267.42

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City  
BERWYN

State  
IL

Zip Code  
60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.81

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932597**

Amount of Each Receipt this Period

39.48

Full Name (Last, First, Middle Initial)

**B. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.25

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847634**

Amount of Each Receipt this Period

28.27

Full Name (Last, First, Middle Initial)

**C. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.52

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902050**

Amount of Each Receipt this Period

28.27

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.79

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932507

Amount of Each Receipt this Period

28.27

Full Name (Last, First, Middle Initial)

**B. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City

PLEASANT PRAIRI

State

WI

Zip Code

53158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.81

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847828

Amount of Each Receipt this Period

88.29

Full Name (Last, First, Middle Initial)

**C. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City

PLEASANT PRAIRI

State

WI

Zip Code

53158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.10

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902243

Amount of Each Receipt this Period

88.29

**SUBTOTAL** of Receipts This Page (optional)..... ►

204.85

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City State Zip Code  
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932699**

Amount of Each Receipt this Period

88.29

Full Name (Last, First, Middle Initial)

**B. Alfredo M Cantoral**

Mailing Address 340 W Superior St

City State Zip Code  
 Chicago IL 60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.47

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847914**

Amount of Each Receipt this Period

25.71

Full Name (Last, First, Middle Initial)

**C. Alfredo M Cantoral**

Mailing Address 340 W Superior St

City State Zip Code  
 Chicago IL 60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.18

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902330**

Amount of Each Receipt this Period

25.71

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.71

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 34 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Alfredo M Cantoral

Mailing Address 340 W Superior St

City State Zip Code  
 Chicago IL 60654

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932785

Amount of Each Receipt this Period

25.71

Full Name (Last, First, Middle Initial)

B. IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902252

Amount of Each Receipt this Period

26.93

Full Name (Last, First, Middle Initial)

C. IRIS M CHESTER

Mailing Address 643 ST GEORGE CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932708

Amount of Each Receipt this Period

26.93

SUBTOTAL of Receipts This Page (optional)..... ►

79.57

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 35 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City State Zip Code  
 ELMHURST IL 60126

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902196

Amount of Each Receipt this Period

20.46

Full Name (Last, First, Middle Initial)

B. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City State Zip Code  
 ELMHURST IL 60126

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.06

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932653

Amount of Each Receipt this Period

20.46

Full Name (Last, First, Middle Initial)

C. SCOTT M CHRISTENSEN

Mailing Address 612 Wrightwood Terrace

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Director Call Cent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847764

Amount of Each Receipt this Period

44.82

SUBTOTAL of Receipts This Page (optional)..... ►

85.74

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SCOTT M CHRISTENSEN**

Mailing Address 612 Wrightwood Terrace

City State Zip Code  
Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Director Call Cent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.20

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902179**

Amount of Each Receipt this Period

44.82

Full Name (Last, First, Middle Initial)

**B. SCOTT M CHRISTENSEN**

Mailing Address 612 Wrightwood Terrace

City State Zip Code  
Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Director Call Cent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.02

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932636**

Amount of Each Receipt this Period

44.82

Full Name (Last, First, Middle Initial)

**C. Kathryn H Chucan**

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code  
KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Retention Analytics Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.31

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847836**

Amount of Each Receipt this Period

42.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.44

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 37 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kathryn H Chucan

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Retention Analytics Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.11

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902251

Amount of Each Receipt this Period

42.80

Full Name (Last, First, Middle Initial)

B. Kathryn H Chucan

Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Retention Analytics Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932707

Amount of Each Receipt this Period

42.80

Full Name (Last, First, Middle Initial)

C. EDWARD T CLARK

Mailing Address 2907 GLENARYE DR

City State Zip Code  
 LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847787

Amount of Each Receipt this Period

28.61

SUBTOTAL of Receipts This Page (optional)..... ►

114.21

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

283.58

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902202**

Amount of Each Receipt this Period

28.61

Full Name (Last, First, Middle Initial)

**B. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.19

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932659**

Amount of Each Receipt this Period

28.61

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER W CLAY**

Mailing Address 9330 Malheur Way

City

ELK GROVE

State

CA

Zip Code

95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.39

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847899**

Amount of Each Receipt this Period

35.64

**SUBTOTAL** of Receipts This Page (optional)..... ►

92.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER W CLAY**

Mailing Address 9330 Malheur Way

City	State	Zip Code
ELK GROVE	CA	95758

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902315

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER W CLAY**

Mailing Address 9330 Malheur Way

City	State	Zip Code
ELK GROVE	CA	95758

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932770

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**C. MARK P CLOGHESSY**

Mailing Address 4343 LAWN AVE

City	State	Zip Code
WESTERN SPRINGS	IL	60558

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMD-INV-International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847686

Amount of Each Receipt this Period

38.40

SUBTOTAL of Receipts This Page (optional)..... ►

109.68

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARK P CLOGHESSY**

Mailing Address 4343 LAWN AVE

City State Zip Code  
WESTERN SPRINGS IL 60558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMD-INV-International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902102**

Amount of Each Receipt this Period

38.40

Full Name (Last, First, Middle Initial)

## **B. MARK P CLOGHESSY**

Mailing Address 4343 LAWN AVE

City State Zip Code  
WESTERN SPRINGS IL 60558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMD-INV-International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.40

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932559**

Amount of Each Receipt this Period

38.40

Full Name (Last, First, Middle Initial)

## **C. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City State Zip Code  
PALM HARBOR FL 34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.06

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847785**

Amount of Each Receipt this Period

32.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

108.98

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 229

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City

PALM HARBOR

State

FL

Zip Code

34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.24

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902200**

Amount of Each Receipt this Period

32.18

Full Name (Last, First, Middle Initial)

**B. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City

PALM HARBOR

State

FL

Zip Code

34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.42

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932657**

Amount of Each Receipt this Period

32.18

Full Name (Last, First, Middle Initial)

**C. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.99

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847752**

Amount of Each Receipt this Period

38.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.54

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code  
 WINNETKA IL 60093

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902167

Amount of Each Receipt this Period

38.18

Full Name (Last, First, Middle Initial)

**B. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code  
 WINNETKA IL 60093

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932624

Amount of Each Receipt this Period

38.18

Full Name (Last, First, Middle Initial)

**C. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Shared S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847755

Amount of Each Receipt this Period

23.08

SUBTOTAL of Receipts This Page (optional)..... ►

99.44

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City  
KILDEER

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ATO-Bus Prtn-Shared S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.27

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902170**

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

**B. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City  
KILDEER

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ATO-Bus Prtn-Shared S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.35

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932627**

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

**C. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.92

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847715**

Amount of Each Receipt this Period

50.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.57

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.33

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902131**

Amount of Each Receipt this Period

50.41

Full Name (Last, First, Middle Initial)

**B. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.74

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932588**

Amount of Each Receipt this Period

50.41

Full Name (Last, First, Middle Initial)

**C. LARRY K CONLEE**

Mailing Address 363 Kensington Ct.

City State Zip Code  
 Palatine IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.28

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902158**

Amount of Each Receipt this Period

20.53

**SUBTOTAL** of Receipts This Page (optional)..... ►

121.35

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City State Zip Code  
 Palatine IL 60067

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Direct

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932615

Amount of Each Receipt this Period

20.53

Full Name (Last, First, Middle Initial)

B. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
 GREEN OAKS IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847598

Amount of Each Receipt this Period

63.78

Full Name (Last, First, Middle Initial)

C. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
 GREEN OAKS IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902014

Amount of Each Receipt this Period

63.78

SUBTOTAL of Receipts This Page (optional)..... ►

148.09

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
 GREEN OAKS IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

693.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932471

Amount of Each Receipt this Period

63.78

Full Name (Last, First, Middle Initial)

B. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932629

Amount of Each Receipt this Period

18.89

Full Name (Last, First, Middle Initial)

C. RICHARD C CRIST Jr.

Mailing Address 252 Center Point Lane

City State Zip Code  
 Lansdale PA 19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847639

Amount of Each Receipt this Period

74.13

SUBTOTAL of Receipts This Page (optional)..... ►

156.80

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD C CRIST Jr.

Mailing Address 252 Center Point Lane

City State Zip Code  
 Lansdale PA 19446

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.40

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902055

Amount of Each Receipt this Period

74.13

Full Name (Last, First, Middle Initial)

B. RICHARD C CRIST Jr.

Mailing Address 252 Center Point Lane

City State Zip Code  
 Lansdale PA 19446

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932512

Amount of Each Receipt this Period

74.13

Full Name (Last, First, Middle Initial)

C. ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.45

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847658

Amount of Each Receipt this Period

39.79

SUBTOTAL of Receipts This Page (optional)..... ►

188.05

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 229

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City	State	Zip Code
Oak Park	IL	60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

**Transaction ID : A2013-2902074**

Amount of Each Receipt this Period

39.79

Full Name (Last, First, Middle Initial)

**B. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City	State	Zip Code
Oak Park	IL	60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

**Transaction ID : A2013-2932531**

Amount of Each Receipt this Period

39.79

Full Name (Last, First, Middle Initial)

**C. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-847716**

Amount of Each Receipt this Period

50.96

**SUBTOTAL** of Receipts This Page (optional)..... ►

130.54

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902132

Amount of Each Receipt this Period

50.96

Full Name (Last, First, Middle Initial)

**B. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Contact Center Impl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.74

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932589

Amount of Each Receipt this Period

50.96

Full Name (Last, First, Middle Initial)

**C. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.23

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847677

Amount of Each Receipt this Period

42.33

SUBTOTAL of Receipts This Page (optional)..... ►

144.25

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 229

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.56

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902093**

Amount of Each Receipt this Period

42.33

Full Name (Last, First, Middle Initial)

**B. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.89

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932550**

Amount of Each Receipt this Period

42.33

Full Name (Last, First, Middle Initial)

**C. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City State Zip Code  
 ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.66

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847800**

Amount of Each Receipt this Period

56.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

140.73

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.73

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902215**

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

**B. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932671**

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

**C. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City State Zip Code  
BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847779**

Amount of Each Receipt this Period

22.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

134.64

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902194

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**B. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932651

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. LORI A DESCH**

Mailing Address 12923 Freemont Peak Lane

City	State	Zip Code
Humble	TX	77346

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847673

Amount of Each Receipt this Period

48.13

SUBTOTAL of Receipts This Page (optional)..... ►

93.13

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LORI A DESCH**

Mailing Address 12923 Freemont Peak Lane

City State Zip Code  
Humble TX 77346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.03

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902089**

Amount of Each Receipt this Period

48.13

Full Name (Last, First, Middle Initial)

## **B. LORI A DESCH**

Mailing Address 12923 Freemont Peak Lane

City State Zip Code  
Humble TX 77346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.16

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932546**

Amount of Each Receipt this Period

48.13

Full Name (Last, First, Middle Initial)

## **C. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code  
BARRINGTON HILLS IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.98

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902244**

Amount of Each Receipt this Period

21.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

117.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code  
 BARRINGTON HILLS IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932700**

Amount of Each Receipt this Period

21.05

Full Name (Last, First, Middle Initial)

**B. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
 Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CR-Public Social Respo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847900**

Amount of Each Receipt this Period

59.02

Full Name (Last, First, Middle Initial)

**C. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
 Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CR-Public Social Respo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.09

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902316**

Amount of Each Receipt this Period

59.02

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City

Northfield

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CR-Public Social Respo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.11

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932771**

Amount of Each Receipt this Period

59.02

Full Name (Last, First, Middle Initial)

## **B. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Annuity Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.04

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847780**

Amount of Each Receipt this Period

60.86

Full Name (Last, First, Middle Initial)

## **C. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Annuity Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902195**

Amount of Each Receipt this Period

60.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.74

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Annuity Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.76

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932652**

Amount of Each Receipt this Period

60.86

Full Name (Last, First, Middle Initial)

**B. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.05

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902268**

Amount of Each Receipt this Period

21.30

Full Name (Last, First, Middle Initial)

**C. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.35

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932724**

Amount of Each Receipt this Period

21.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

103.46

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DANIEL C DRESSEL**

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

212.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	7		2	0	1	3		

Transaction ID : A2013-2902057

Amount of Each Receipt this Period

21.57

Full Name (Last, First, Middle Initial)

**B. DANIEL C DRESSEL**

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

233.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	3		

Transaction ID : A2013-2932514

Amount of Each Receipt this Period

21.57

Full Name (Last, First, Middle Initial)

**C. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	3		2	0	1	3		

Transaction ID : A2013-847701

Amount of Each Receipt this Period

31.47

SUBTOTAL of Receipts This Page (optional)..... ▶

74.61

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.32

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902117

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**B. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.79

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932574

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**C. DONALD L DUFF**

Mailing Address 127 E. STREAMWOOD BLVD.

City

STREAMWOOD

State

IL

Zip Code

60107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.40

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847698

Amount of Each Receipt this Period

32.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

95.61

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DONALD L DUFF**

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code  
 STREAMWOOD IL 60107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.07

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902114**

Amount of Each Receipt this Period

32.67

Full Name (Last, First, Middle Initial)

**B. DONALD L DUFF**

Mailing Address 127 E. STREAMWOOD BLVD.

City State Zip Code  
 STREAMWOOD IL 60107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.74

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932571**

Amount of Each Receipt this Period

32.67

Full Name (Last, First, Middle Initial)

**C. MICHAEL S DUNN**

Mailing Address 18202 HARNISH RD.

City State Zip Code  
 ROSCOE IL 61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.19

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847763**

Amount of Each Receipt this Period

28.32

**SUBTOTAL** of Receipts This Page (optional)..... ►

93.66

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. MICHAEL S DUNN**

Mailing Address 18202 HARNISH RD.

City	State	Zip Code
ROSCOE	IL	61073

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902178

Amount of Each Receipt this Period

28.32

Full Name (Last, First, Middle Initial)

**B. MICHAEL S DUNN**

Mailing Address 18202 HARNISH RD.

City	State	Zip Code
ROSCOE	IL	61073

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932635

Amount of Each Receipt this Period

28.32

Full Name (Last, First, Middle Initial)

**C. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Strategy &amp; Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847766

Amount of Each Receipt this Period

25.27

SUBTOTAL of Receipts This Page (optional)..... ►

81.91

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Strategy &amp; Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.10

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902181

Amount of Each Receipt this Period

25.27

Full Name (Last, First, Middle Initial)

**B. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Strategy &amp; Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.37

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932638

Amount of Each Receipt this Period

25.27

Full Name (Last, First, Middle Initial)

**C. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City State Zip Code  
 LINCOLNSHIRE IL 60069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847823

Amount of Each Receipt this Period

29.38

SUBTOTAL of Receipts This Page (optional)..... ►

79.92

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City  
LINCOLNSHIRE

State Zip Code  
IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902238**

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

**B. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City  
LINCOLNSHIRE

State Zip Code  
IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.18

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932694**

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

**C. Thomas V Ealy**

Mailing Address 1541 West Wolfram Street

City  
Chicago

State Zip Code  
IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.92

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847915**

Amount of Each Receipt this Period

82.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Thomas V Ealy

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902331

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

B. Thomas V Ealy

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932786

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

C. ROBERT N EMMICH

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code  
 CANTON MS 39046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932761

Amount of Each Receipt this Period

18.58

SUBTOTAL of Receipts This Page (optional)..... ►

184.56

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City  
CHICAGO

State Zip Code  
IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.59

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847791**

Amount of Each Receipt this Period

42.38

Full Name (Last, First, Middle Initial)

**B. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City  
CHICAGO

State Zip Code  
IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.97

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902206**

Amount of Each Receipt this Period

42.38

Full Name (Last, First, Middle Initial)

**C. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.45

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847603**

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

142.45

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESSState Zip Code  
IL 60067FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity &amp; Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

**Transaction ID : A2013-2902019**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**B. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESSState Zip Code  
IL 60067FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity &amp; Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

**Transaction ID : A2013-2932476**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**C. CAROLYN A FILIPOVIC**

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEWState Zip Code  
IL 60025FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-847816**

Amount of Each Receipt this Period

31.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

146.76

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.66

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902231

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

B. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.04

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932687

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

C. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City  
ANTIOCH

State Zip Code  
IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.62

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847631

Amount of Each Receipt this Period

27.90

SUBTOTAL of Receipts This Page (optional)..... ►

90.66

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code  
 ANTIOCH IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902047**

Amount of Each Receipt this Period

27.90

Full Name (Last, First, Middle Initial)

## **B. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code  
 ANTIOCH IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932504**

Amount of Each Receipt this Period

27.90

Full Name (Last, First, Middle Initial)

## **C. GEORGIA FLAMPORIS**

Mailing Address 316 B Palsted Ave.

City State Zip Code  
 Westfield NJ 07090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 16 / 2013

**Transaction ID : A2013-2901186**

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

355.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief of Staff & St

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.47

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847825**

Amount of Each Receipt this Period

39.59

Full Name (Last, First, Middle Initial)

## **B. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief of Staff & St

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.06

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902240**

Amount of Each Receipt this Period

39.59

Full Name (Last, First, Middle Initial)

## **C. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief of Staff & St

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.65

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932696**

Amount of Each Receipt this Period

39.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KELLY F FOGARTY**

Mailing Address 613 REX

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-Affinity Solutions Chi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.63

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847725**

Amount of Each Receipt this Period

50.19

Full Name (Last, First, Middle Initial)

**B. KELLY F FOGARTY**

Mailing Address 613 REX

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-Affinity Solutions Chi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.82

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902141**

Amount of Each Receipt this Period

50.19

Full Name (Last, First, Middle Initial)

**C. KELLY F FOGARTY**

Mailing Address 613 REX

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-Affinity Solutions Chi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.01

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932598**

Amount of Each Receipt this Period

50.19

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.57

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.38

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847855

Amount of Each Receipt this Period

52.83

Full Name (Last, First, Middle Initial)

**B. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.21

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902270

Amount of Each Receipt this Period

52.83

Full Name (Last, First, Middle Initial)

**C. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.04

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932726

Amount of Each Receipt this Period

52.83

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.49

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City State Zip Code  
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.57

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847742

Amount of Each Receipt this Period

33.53

Full Name (Last, First, Middle Initial)

**B. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City State Zip Code  
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.10

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902157

Amount of Each Receipt this Period

33.53

Full Name (Last, First, Middle Initial)

**C. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City State Zip Code  
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932614

Amount of Each Receipt this Period

33.53

SUBTOTAL of Receipts This Page (optional)..... ►

100.59

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ANGELA FUSCO**

Mailing Address 1199 E Port Clinton Road

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.45

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847640**

Amount of Each Receipt this Period

41.22

Full Name (Last, First, Middle Initial)

## **B. ANGELA FUSCO**

Mailing Address 1199 E Port Clinton Road

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.67

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902056**

Amount of Each Receipt this Period

41.22

Full Name (Last, First, Middle Initial)

## **C. ANGELA FUSCO**

Mailing Address 1199 E Port Clinton Road

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932513**

Amount of Each Receipt this Period

41.22

**SUBTOTAL** of Receipts This Page (optional)..... ►

123.66

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.90

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847599**

Amount of Each Receipt this Period

27.95

Full Name (Last, First, Middle Initial)

## **B. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.85

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902015**

Amount of Each Receipt this Period

27.95

Full Name (Last, First, Middle Initial)

## **C. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.80

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932472**

Amount of Each Receipt this Period

27.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Patricia L Garza**

Mailing Address 839 Chilton Lane

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 16 / 2013

**Transaction ID : A2013-2900729**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847747**

Amount of Each Receipt this Period

39.01

Full Name (Last, First, Middle Initial)

**C. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.01

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902162**

Amount of Each Receipt this Period

39.01

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

328.02

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.02

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932619**

Amount of Each Receipt this Period

39.01

Full Name (Last, First, Middle Initial)

## **B. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City State Zip Code  
GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres & Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.85

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847711**

Amount of Each Receipt this Period

49.72

Full Name (Last, First, Middle Initial)

## **C. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City State Zip Code  
GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres & Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.57

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902127**

Amount of Each Receipt this Period

49.72

**SUBTOTAL** of Receipts This Page (optional)..... ►

138.45

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AF-Pres & Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.29

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932584**

Amount of Each Receipt this Period

49.72

Full Name (Last, First, Middle Initial)

## **B. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City  
HOFFMAN ESTATES

State Zip Code  
IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.16

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847857**

Amount of Each Receipt this Period

33.20

Full Name (Last, First, Middle Initial)

## **C. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City  
HOFFMAN ESTATES

State Zip Code  
IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.36

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902272**

Amount of Each Receipt this Period

33.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

116.12

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932728**

Amount of Each Receipt this Period

33.20

Full Name (Last, First, Middle Initial)

## **B. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847604**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

## **C. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902020**

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.20

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932477

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City State Zip Code  
 Roswell GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902021

Amount of Each Receipt this Period

22.57

Full Name (Last, First, Middle Initial)

**C. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City State Zip Code  
 Roswell GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.96

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932478

Amount of Each Receipt this Period

22.57

SUBTOTAL of Receipts This Page (optional)..... ►

90.14

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.07

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902122**

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

**B. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.12

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932579**

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

**C. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.54

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847886**

Amount of Each Receipt this Period

35.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

79.96

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902302

Amount of Each Receipt this Period

35.86

Full Name (Last, First, Middle Initial)

**B. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932758

Amount of Each Receipt this Period

35.86

Full Name (Last, First, Middle Initial)

**C. GEORGE F GRAWE**

Mailing Address 801 N. Vail Avenue

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff &amp; Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847671

Amount of Each Receipt this Period

25.62

SUBTOTAL of Receipts This Page (optional)..... ►

97.34

TOTAL This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff &amp; Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.95

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902087

Amount of Each Receipt this Period

76.86

Full Name (Last, First, Middle Initial)

B. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff &amp; Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.19

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932544

Amount of Each Receipt this Period

51.24

Full Name (Last, First, Middle Initial)

c. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code  
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847906

Amount of Each Receipt this Period

59.05

SUBTOTAL of Receipts This Page (optional)..... ►

187.15

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Mark A Green**

Mailing Address 1711 Wildwood Ct

City State Zip Code  
 Glenview IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.85

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902322**

Amount of Each Receipt this Period

59.05

Full Name (Last, First, Middle Initial)

**B. Mark A Green**

Mailing Address 1711 Wildwood Ct

City State Zip Code  
 Glenview IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932777**

Amount of Each Receipt this Period

59.05

Full Name (Last, First, Middle Initial)

**C. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City State Zip Code  
 OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847682**

Amount of Each Receipt this Period

73.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

191.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City State Zip Code  
OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.89

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902098**

Amount of Each Receipt this Period

73.85

Full Name (Last, First, Middle Initial)

**B. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City State Zip Code  
OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.74

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932555**

Amount of Each Receipt this Period

73.85

Full Name (Last, First, Middle Initial)

**C. MARYLIN H GROOM**

Mailing Address 170 ASPINWALL STREET

City State Zip Code  
WESTBURY NY 11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.19

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932488**

Amount of Each Receipt this Period

18.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

166.12

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.70

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847815**

Amount of Each Receipt this Period

54.67

Full Name (Last, First, Middle Initial)

**B. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.10

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902230**

Amount of Each Receipt this Period

32.40

Full Name (Last, First, Middle Initial)

**C. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.50

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932686**

Amount of Each Receipt this Period

32.40

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.47

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City  
GRAYSLAKEState Zip Code  
IL 60030FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847865

Amount of Each Receipt this Period

40.56

Full Name (Last, First, Middle Initial)

**B. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City  
GRAYSLAKEState Zip Code  
IL 60030FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902280

Amount of Each Receipt this Period

40.56

Full Name (Last, First, Middle Initial)

**C. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City  
GRAYSLAKEState Zip Code  
IL 60030FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932736

Amount of Each Receipt this Period

40.56

SUBTOTAL of Receipts This Page (optional)..... ►

121.68

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. David S Harper**

Mailing Address 41 Lancaster Lane

City State Zip Code  
 Lincolnshire IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.40

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847908**

Amount of Each Receipt this Period

65.24

Full Name (Last, First, Middle Initial)

**B. David S Harper**

Mailing Address 41 Lancaster Lane

City State Zip Code  
 Lincolnshire IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.64

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902324**

Amount of Each Receipt this Period

65.24

Full Name (Last, First, Middle Initial)

**c. David S Harper**

Mailing Address 41 Lancaster Lane

City State Zip Code  
 Lincolnshire IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.88

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932779**

Amount of Each Receipt this Period

65.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

195.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City  
ROSELLEState  
ILZip Code  
60172FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.36

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847678

Amount of Each Receipt this Period

27.87

Full Name (Last, First, Middle Initial)

B. KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City  
ROSELLEState  
ILZip Code  
60172FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.23

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902094

Amount of Each Receipt this Period

27.87

Full Name (Last, First, Middle Initial)

C. KEITH A HAUSCHILDT

Mailing Address 636 ROSEDALE AVE

City  
ROSELLEState  
ILZip Code  
60172FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.10

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932551

Amount of Each Receipt this Period

27.87

SUBTOTAL of Receipts This Page (optional)..... ►

83.61

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.57

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847922

Amount of Each Receipt this Period

36.92

Full Name (Last, First, Middle Initial)

B. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902338

Amount of Each Receipt this Period

36.92

Full Name (Last, First, Middle Initial)

C. Barbara A Higgins

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932793

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional)..... ►

110.76

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.30

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847656

Amount of Each Receipt this Period

133.38

Full Name (Last, First, Middle Initial)

**B. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1188.68

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902072

Amount of Each Receipt this Period

133.38

Full Name (Last, First, Middle Initial)

**C. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1322.06

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932529

Amount of Each Receipt this Period

133.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

400.14

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LINDA M HONOUR**

Mailing Address 464 Washington Road

City	State	Zip Code
Lake Forest	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Prog Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847896

Amount of Each Receipt this Period

46.14

Full Name (Last, First, Middle Initial)

**B. LINDA M HONOUR**

Mailing Address 464 Washington Road

City	State	Zip Code
Lake Forest	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Prog Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902312

Amount of Each Receipt this Period

46.14

Full Name (Last, First, Middle Initial)

**C. LINDA M HONOUR**

Mailing Address 464 Washington Road

City	State	Zip Code
Lake Forest	IL	60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Prog Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932767

Amount of Each Receipt this Period

46.14

SUBTOTAL of Receipts This Page (optional)..... ►

138.42

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. MARY L HUBER**

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902249

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

**B. MARY L HUBER**

Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.69

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932705

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

**C. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code  
 JACKSONVILLE FL 32259

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.82

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902060

Amount of Each Receipt this Period

21.75

SUBTOTAL of Receipts This Page (optional)..... ►

63.13

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City	State	Zip Code
JACKSONVILLE	FL	32259

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932517

Amount of Each Receipt this Period

21.75

Full Name (Last, First, Middle Initial)

**B. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847748

Amount of Each Receipt this Period

56.38

Full Name (Last, First, Middle Initial)

**C. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902163

Amount of Each Receipt this Period

56.38

SUBTOTAL of Receipts This Page (optional)..... ►

134.51

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.29

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932620**

Amount of Each Receipt this Period

56.38

Full Name (Last, First, Middle Initial)

## **B. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.82

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847719**

Amount of Each Receipt this Period

31.98

Full Name (Last, First, Middle Initial)

## **C. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902135**

Amount of Each Receipt this Period

31.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.78

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932592**

Amount of Each Receipt this Period

31.98

Full Name (Last, First, Middle Initial)

## **B. BOB A JACKSON**

Mailing Address 226 Maison Court

City State Zip Code  
 Altamonte Springs FL 32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.33

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847870**

Amount of Each Receipt this Period

23.15

Full Name (Last, First, Middle Initial)

## **C. BOB A JACKSON**

Mailing Address 226 Maison Court

City State Zip Code  
 Altamonte Springs FL 32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902286**

Amount of Each Receipt this Period

23.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

78.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BOB A JACKSON**

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.63

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932742**

Amount of Each Receipt this Period

23.15

Full Name (Last, First, Middle Initial)

**B. JAMES C JAMIESON**

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.77

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847702**

Amount of Each Receipt this Period

39.92

Full Name (Last, First, Middle Initial)

**C. JAMES C JAMIESON**

Mailing Address 25 BRUCE CIRCLE NORTH

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.69

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902118**

Amount of Each Receipt this Period

39.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES C JAMIESON**

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.61

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932575**

Amount of Each Receipt this Period

39.92

Full Name (Last, First, Middle Initial)

**B. Marcia Kaminsky**

Mailing Address 2634 North Wayne

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Corporate Communic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.96

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847916**

Amount of Each Receipt this Period

71.85

Full Name (Last, First, Middle Initial)

**C. Marcia Kaminsky**

Mailing Address 2634 North Wayne

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Corporate Communic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.81

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902332**

Amount of Each Receipt this Period

71.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

183.62

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Marcia Kaminsky**

Mailing Address 2634 North Wayne

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Corporate Communic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

781.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932787

Amount of Each Receipt this Period

71.85

Full Name (Last, First, Middle Initial)

**B. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
 Castle Rock CO 80109

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847608

Amount of Each Receipt this Period

24.29

Full Name (Last, First, Middle Initial)

**C. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
 Castle Rock CO 80109

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.93

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902024

Amount of Each Receipt this Period

24.29

SUBTOTAL of Receipts This Page (optional)..... ►

120.43

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
Castle Rock CO 80109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.22

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932481**

Amount of Each Receipt this Period

24.29

Full Name (Last, First, Middle Initial)

**B. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.65

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847919**

Amount of Each Receipt this Period

55.85

Full Name (Last, First, Middle Initial)

**C. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902335**

Amount of Each Receipt this Period

55.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.99

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.35

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932790**

Amount of Each Receipt this Period

55.85

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRT-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.57

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847593**

Amount of Each Receipt this Period

56.46

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRT-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.03

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902009**

Amount of Each Receipt this Period

56.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

168.77

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRT-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.49

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932466

Amount of Each Receipt this Period

56.46

Full Name (Last, First, Middle Initial)

**B. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City

BARTLETT

State

IL

Zip Code

60103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.09

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847703

Amount of Each Receipt this Period

43.67

Full Name (Last, First, Middle Initial)

**C. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City

BARTLETT

State

IL

Zip Code

60103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.76

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902119

Amount of Each Receipt this Period

43.67

SUBTOTAL of Receipts This Page (optional)..... ►

143.80

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code  
 BARTLETT IL 60103

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.43

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932576

Amount of Each Receipt this Period

43.67

Full Name (Last, First, Middle Initial)

**B. PAUL N KIERIG**

Mailing Address 200 OXFORD RD

City State Zip Code  
 Tower Lakes IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847736

Amount of Each Receipt this Period

27.27

Full Name (Last, First, Middle Initial)

**C. PAUL N KIERIG**

Mailing Address 200 OXFORD RD

City State Zip Code  
 Tower Lakes IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902151

Amount of Each Receipt this Period

27.27

SUBTOTAL of Receipts This Page (optional)..... ►

98.21

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PAUL N KIERIG**

Mailing Address 200 OXFORD RD

City	State	Zip Code
Tower Lakes	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932608

Amount of Each Receipt this Period

27.27

Full Name (Last, First, Middle Initial)

**B. BARBARA L KILROY**

Mailing Address 1036 VINEYARD DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902065

Amount of Each Receipt this Period

20.89

Full Name (Last, First, Middle Initial)

**C. BARBARA L KILROY**

Mailing Address 1036 VINEYARD DRIVE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932522

Amount of Each Receipt this Period

20.89

SUBTOTAL of Receipts This Page (optional)..... ►

69.05

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNE I KIM**

Mailing Address 1580 SHERMAN AVE # 201

City  
EVANSTON

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.21

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902219**

Amount of Each Receipt this Period

21.20

Full Name (Last, First, Middle Initial)

**B. ANNE I KIM**

Mailing Address 1580 SHERMAN AVE # 201

City  
EVANSTON

State Zip Code  
IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.41

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932675**

Amount of Each Receipt this Period

21.20

Full Name (Last, First, Middle Initial)

**C. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City  
LEBANON

State Zip Code  
PA 17042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.52

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902053**

Amount of Each Receipt this Period

22.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

64.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City  
LEBANON

State Zip Code  
PA 17042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.77

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932510**

Amount of Each Receipt this Period

22.25

Full Name (Last, First, Middle Initial)

**B. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.60

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847862**

Amount of Each Receipt this Period

37.39

Full Name (Last, First, Middle Initial)

**C. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.99

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902277**

Amount of Each Receipt this Period

37.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

97.03

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.38

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932733**

Amount of Each Receipt this Period

37.39

Full Name (Last, First, Middle Initial)

**B. DANIEL P KRAFT**

Mailing Address 1884 S. WARBLER CT.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
MICR-PSID Vehicle-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.25

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902091**

Amount of Each Receipt this Period

12.46

Full Name (Last, First, Middle Initial)

**C. DANIEL P KRAFT**

Mailing Address 1884 S. WARBLER CT.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
MICR-PSID Vehicle-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.25

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2901398**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL P KRAFT**

Mailing Address 1884 S. WARBLER CT.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
MICR-PSID Vehicle-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.71

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932548**

Amount of Each Receipt this Period

12.46

Full Name (Last, First, Middle Initial)

**B. JAIKRISHNA KUCHIMANCHI**

Mailing Address 1503 ALMADEN LN

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.58

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847794**

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

**C. JAIKRISHNA KUCHIMANCHI**

Mailing Address 1503 ALMADEN LN

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.04

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902209**

Amount of Each Receipt this Period

35.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.38

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAIKRISHNA KUCHIMANCHI**

Mailing Address 1503 ALMADEN LN

City  
GURNEEState Zip Code  
IL 60031FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

**Transaction ID : A2013-2932665**

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

**B. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City  
GLENVIEWState Zip Code  
IL 60025FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
VP-SAL-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-847667**

Amount of Each Receipt this Period

23.96

Full Name (Last, First, Middle Initial)

**C. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City  
GLENVIEWState Zip Code  
IL 60025FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
VP-SAL-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

**Transaction ID : A2013-2902083**

Amount of Each Receipt this Period

23.96

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.38

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.41

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932540**

Amount of Each Receipt this Period

23.96

Full Name (Last, First, Middle Initial)

**B. PHILLIP E LAWSON**

Mailing Address 1050 Lake Carolyn Parkway

City  
Irving

State Zip Code  
TX 75039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.40

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847867**

Amount of Each Receipt this Period

88.65

Full Name (Last, First, Middle Initial)

**C. PHILLIP E LAWSON**

Mailing Address 1050 Lake Carolyn Parkway

City  
Irving

State Zip Code  
TX 75039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.05

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902283**

Amount of Each Receipt this Period

88.65

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

201.26

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PHILLIP E LAWSON**

Mailing Address 1050 Lake Carolyn Parkway

City State Zip Code  
 Irving TX 75039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.70

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932739**

Amount of Each Receipt this Period

88.65

Full Name (Last, First, Middle Initial)

**B. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Chief Legal Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.79

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847592**

Amount of Each Receipt this Period

51.00

Full Name (Last, First, Middle Initial)

**C. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Chief Legal Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.79

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902008**

Amount of Each Receipt this Period

51.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

190.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City  
DEERFIELD

State Zip Code  
IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-LGL-Chief Legal Offic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.79

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932465**

Amount of Each Receipt this Period

51.00

Full Name (Last, First, Middle Initial)

**B. NANCY K LEMKE**

Mailing Address 5697 BROOKSTONE WALK

City  
ACWORTH

State Zip Code  
GA 30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.10

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847758**

Amount of Each Receipt this Period

23.51

Full Name (Last, First, Middle Initial)

**C. NANCY K LEMKE**

Mailing Address 5697 BROOKSTONE WALK

City  
ACWORTH

State Zip Code  
GA 30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.61

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902173**

Amount of Each Receipt this Period

23.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. NANCY K LEMKE**

Mailing Address 5697 BROOKSTONE WALK

City State Zip Code  
 ACWORTH GA 30101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932630**

Amount of Each Receipt this Period

23.51

Full Name (Last, First, Middle Initial)

## **B. GARY L LEVINE**

Mailing Address 16340 W. Arlington Drive

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932717**

Amount of Each Receipt this Period

19.51

Full Name (Last, First, Middle Initial)

## **C. Peter G Logotheitis**

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.10

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847920**

Amount of Each Receipt this Period

61.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

104.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. Peter G Logothesis**

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902336**

Amount of Each Receipt this Period

61.80

Full Name (Last, First, Middle Initial)

## **B. Peter G Logothesis**

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.70

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932791**

Amount of Each Receipt this Period

61.80

Full Name (Last, First, Middle Initial)

## **C. GREGORY J LUCETT**

Mailing Address P.O. BOX 9242

City State Zip Code  
GLENDALE CA 91226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.39

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847888**

Amount of Each Receipt this Period

35.76

**SUBTOTAL** of Receipts This Page (optional)..... ►

159.36

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY J LUCETT**

Mailing Address P.O. BOX 9242

City  
GLENDALE

State Zip Code  
CA 91226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.15

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902304**

Amount of Each Receipt this Period

35.76

Full Name (Last, First, Middle Initial)

**B. GREGORY J LUCETT**

Mailing Address P.O. BOX 9242

City  
GLENDALE

State Zip Code  
CA 91226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.91

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932759**

Amount of Each Receipt this Period

35.76

Full Name (Last, First, Middle Initial)

**C. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City  
SCHAUMBURG

State Zip Code  
IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.38

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847761**

Amount of Each Receipt this Period

22.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

93.90

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City  
SCHAUMBURG

State Zip Code  
IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.76

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902176**

Amount of Each Receipt this Period

22.38

Full Name (Last, First, Middle Initial)

## **B. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City  
SCHAUMBURG

State Zip Code  
IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.14

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932633**

Amount of Each Receipt this Period

22.38

Full Name (Last, First, Middle Initial)

## **C. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City  
Skokie

State Zip Code  
IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.89

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847782**

Amount of Each Receipt this Period

34.83

**SUBTOTAL** of Receipts This Page (optional)..... ►

79.59

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code  
 Skokie IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.72

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902197**

Amount of Each Receipt this Period

34.83

Full Name (Last, First, Middle Initial)

## **B. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code  
 Skokie IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.55

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932654**

Amount of Each Receipt this Period

34.83

Full Name (Last, First, Middle Initial)

## **C. Katherine A Mabe**

Mailing Address 2750 Commons Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.71

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847917**

Amount of Each Receipt this Period

109.34

**SUBTOTAL** of Receipts This Page (optional)..... ►

179.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Katherine A Mabe

Mailing Address 2750 Commons Drive

City  
GlenviewState  
ILZip Code  
60026FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1079.05

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902333

Amount of Each Receipt this Period

109.34

Full Name (Last, First, Middle Initial)

B. Katherine A Mabe

Mailing Address 2750 Commons Drive

City  
GlenviewState  
ILZip Code  
60026FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1188.39

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932788

Amount of Each Receipt this Period

109.34

Full Name (Last, First, Middle Initial)

C. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City  
CASTLE ROCKState  
COZip Code  
80104FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.01

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847833

Amount of Each Receipt this Period

22.45

SUBTOTAL of Receipts This Page (optional)..... ►

241.13

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 117 OF 229

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City	State	Zip Code
CASTLE ROCK	CO	80104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902248

Amount of Each Receipt this Period

22.45

Full Name (Last, First, Middle Initial)

**B. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City	State	Zip Code
CASTLE ROCK	CO	80104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932704

Amount of Each Receipt this Period

22.45

Full Name (Last, First, Middle Initial)

**C. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902129

Amount of Each Receipt this Period

22.48

SUBTOTAL of Receipts This Page (optional)..... ►

67.38

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City State Zip Code  
MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.81

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932586**

Amount of Each Receipt this Period

22.48

Full Name (Last, First, Middle Initial)

## **B. Rhonda J Masser**

Mailing Address 4807 Wildwood Dr

City State Zip Code  
McHenry IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.23

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932564**

Amount of Each Receipt this Period

20.29

Full Name (Last, First, Middle Initial)

## **C. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
LAKE BLUFF IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.61

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847783**

Amount of Each Receipt this Period

22.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.20

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
LAKE BLUFF IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.04

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902198**

Amount of Each Receipt this Period

22.43

Full Name (Last, First, Middle Initial)

**B. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
LAKE BLUFF IL 60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.47

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932655**

Amount of Each Receipt this Period

22.43

Full Name (Last, First, Middle Initial)

**C. MARY J MC GINN**

Mailing Address 155 BUCKLEY ROAD

City State Zip Code  
BARRINGTON HILL IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-AllCorp Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.04

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847769**

Amount of Each Receipt this Period

86.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

131.06

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY J MC GINN**

Mailing Address 155 BUCKLEY ROAD

City State Zip Code  
BARRINGTON HILL IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-AllCorp Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.24

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902184**

Amount of Each Receipt this Period

86.20

Full Name (Last, First, Middle Initial)

**B. MARY J MC GINN**

Mailing Address 155 BUCKLEY ROAD

City State Zip Code  
BARRINGTON HILL IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-AllCorp Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

942.44

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932641**

Amount of Each Receipt this Period

86.20

Full Name (Last, First, Middle Initial)

**C. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.82

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847729**

Amount of Each Receipt this Period

42.19

**SUBTOTAL** of Receipts This Page (optional)..... ►

214.59

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.01

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902145**

Amount of Each Receipt this Period

42.19

Full Name (Last, First, Middle Initial)

**B. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.20

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932602**

Amount of Each Receipt this Period

42.19

Full Name (Last, First, Middle Initial)

**C. SALLY J MCCARTHY**

Mailing Address 1036 ROLLING PASS

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.58

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847767**

Amount of Each Receipt this Period

24.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

109.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 OF 229

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SALLY J MCCARTHY**

Mailing Address 1036 ROLLING PASS

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.20

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902182**

Amount of Each Receipt this Period

24.62

Full Name (Last, First, Middle Initial)

**B. SALLY J MCCARTHY**

Mailing Address 1036 ROLLING PASS

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.82

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932639**

Amount of Each Receipt this Period

24.62

Full Name (Last, First, Middle Initial)

**C. JOSEPH P MCCORMICK**

Mailing Address 808 PARKDALE CT.

City  
SOUTHLAKE

State Zip Code  
TX 76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.45

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932520**

Amount of Each Receipt this Period

18.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

68.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.88

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847876**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**B. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.59

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902292**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**C. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.30

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932748**

Amount of Each Receipt this Period

31.71

**SUBTOTAL** of Receipts This Page (optional)..... ►

95.13

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City	State	Zip Code
Smithtown	NY	11787

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Transaction ID : A2013-847874

Amount of Each Receipt this Period

45.40

Full Name (Last, First, Middle Initial)

**B. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City	State	Zip Code
Smithtown	NY	11787

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			17			2013			

Transaction ID : A2013-2902290

Amount of Each Receipt this Period

45.40

Full Name (Last, First, Middle Initial)

**C. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City	State	Zip Code
Smithtown	NY	11787

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2013			

Transaction ID : A2013-2932746

Amount of Each Receipt this Period

45.40

SUBTOTAL of Receipts This Page (optional)..... ►

136.20

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company SVP-PF-Strategy & Plannin

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.36

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847676**

Amount of Each Receipt this Period

28.07

Full Name (Last, First, Middle Initial)

**B. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company SVP-PF-Strategy & Plannin

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.43

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902092**

Amount of Each Receipt this Period

28.07

Full Name (Last, First, Middle Initial)

**C. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company SVP-PF-Strategy & Plannin

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932549**

Amount of Each Receipt this Period

28.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

84.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jesse E Merten

Mailing Address 3311 Brook Rd.

City State Zip Code  
 Highland Park IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847921

Amount of Each Receipt this Period

66.46

Full Name (Last, First, Middle Initial)

B. Jesse E Merten

Mailing Address 3311 Brook Rd.

City State Zip Code  
 Highland Park IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902337

Amount of Each Receipt this Period

66.46

Full Name (Last, First, Middle Initial)

C. Jesse E Merten

Mailing Address 3311 Brook Rd.

City State Zip Code  
 Highland Park IL 60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 31 2013

Transaction ID : A2013-2932792

Amount of Each Receipt this Period

66.46

SUBTOTAL of Receipts This Page (optional)..... ►

199.38

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. HANS H METZINGER**

Mailing Address 407 E. CLAIRE LANE

City State Zip Code  
PROSPECT HTS IL 60070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.73

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932626**

Amount of Each Receipt this Period

18.51

Full Name (Last, First, Middle Initial)

**B. JOHN W MICHELI**

Mailing Address 300 E. Church St.

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRT-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.64

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902026**

Amount of Each Receipt this Period

20.87

Full Name (Last, First, Middle Initial)

**C. JOHN W MICHELI**

Mailing Address 300 E. Church St.

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRT-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.51

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932483**

Amount of Each Receipt this Period

20.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.25

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code  
Huddleston VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.80

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847687**

Amount of Each Receipt this Period

31.99

Full Name (Last, First, Middle Initial)

## **B. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code  
Huddleston VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.79

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902103**

Amount of Each Receipt this Period

31.99

Full Name (Last, First, Middle Initial)

## **C. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code  
Huddleston VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.78

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932560**

Amount of Each Receipt this Period

31.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

95.97

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. STEVEN M MILLER**

Mailing Address 1011 Redwood Drive

City	State	Zip Code
ALGONQUIN	IL	60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2013

Transaction ID : A2013-847812

Amount of Each Receipt this Period

24.42

Full Name (Last, First, Middle Initial)

**B. STEVEN M MILLER**

Mailing Address 1011 Redwood Drive

City	State	Zip Code
ALGONQUIN	IL	60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2013

Transaction ID : A2013-2902227

Amount of Each Receipt this Period

24.42

Full Name (Last, First, Middle Initial)

**C. STEVEN M MILLER**

Mailing Address 1011 Redwood Drive

City	State	Zip Code
ALGONQUIN	IL	60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2013

Transaction ID : A2013-2932683

Amount of Each Receipt this Period

24.42

SUBTOTAL of Receipts This Page (optional)..... ►

73.26

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. AMY B MILLS**

Mailing Address 942 Forest Avenue

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.70

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932765**

Amount of Each Receipt this Period

19.47

Full Name (Last, First, Middle Initial)

**B. MARCIE E MOLEK**

Mailing Address 400 KEVIN LANE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.86

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847720**

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

**C. MARCIE E MOLEK**

Mailing Address 400 KEVIN LANE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.73

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902136**

Amount of Each Receipt this Period

26.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

73.21

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARCIE E MOLEK**

Mailing Address 400 KEVIN LANE

City  
GRAYSLAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.60

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932593**

Amount of Each Receipt this Period

26.87

Full Name (Last, First, Middle Initial)

**B. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.96

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847652**

Amount of Each Receipt this Period

39.27

Full Name (Last, First, Middle Initial)

**C. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.23

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902068**

Amount of Each Receipt this Period

39.27

**SUBTOTAL** of Receipts This Page (optional)..... ►

105.41

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932525**

Amount of Each Receipt this Period

39.27

Full Name (Last, First, Middle Initial)

**B. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.41

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847708**

Amount of Each Receipt this Period

43.57

Full Name (Last, First, Middle Initial)

**C. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.98

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902124**

Amount of Each Receipt this Period

43.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

126.41

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.55

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932581

Amount of Each Receipt this Period

43.57

Full Name (Last, First, Middle Initial)

B. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City  
Arlington Heights

State Zip Code  
IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.02

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847852

Amount of Each Receipt this Period

41.99

Full Name (Last, First, Middle Initial)

C. MICHAEL A MURPHY

Mailing Address 1908 N. Silver Lake Road

City  
Arlington Heights

State Zip Code  
IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.01

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902267

Amount of Each Receipt this Period

41.99

SUBTOTAL of Receipts This Page (optional)..... ►

127.55

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A MURPHY**

Mailing Address 1908 N. Silver Lake Road

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932723**

Amount of Each Receipt this Period

41.99

Full Name (Last, First, Middle Initial)

**B. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.75

Date of Receipt

M M / D D / Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847802**

Amount of Each Receipt this Period

65.41

Full Name (Last, First, Middle Initial)

**C. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.16

Date of Receipt

M M / D D / Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902217**

Amount of Each Receipt this Period

65.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

172.81

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

709.57

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932673**

Amount of Each Receipt this Period

65.41

Full Name (Last, First, Middle Initial)

## **B. JOAN M NAUGHTON**

Mailing Address 994 N. Cove Dr.

City  
PALATINE

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.40

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902199**

Amount of Each Receipt this Period

20.54

Full Name (Last, First, Middle Initial)

## **C. JOAN M NAUGHTON**

Mailing Address 994 N. Cove Dr.

City  
PALATINE

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.94

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932656**

Amount of Each Receipt this Period

20.54

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.49

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City State Zip Code  
 DEER PARK IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company SVP-LGL-Enterprise Busine

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.82

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847854**

Amount of Each Receipt this Period

61.43

Full Name (Last, First, Middle Initial)

**B. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City State Zip Code  
 DEER PARK IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company SVP-LGL-Enterprise Busine

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902269**

Amount of Each Receipt this Period

61.43

Full Name (Last, First, Middle Initial)

**C. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City State Zip Code  
 DEER PARK IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company SVP-LGL-Enterprise Busine

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932725**

Amount of Each Receipt this Period

61.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

184.29



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS R NORTON**

Mailing Address 1423 PIONEER COURT

City  
WAUKEGAN

State Zip Code  
IL 60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-HO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.73

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847795**

Amount of Each Receipt this Period

31.97

Full Name (Last, First, Middle Initial)

**B. THOMAS R NORTON**

Mailing Address 1423 PIONEER COURT

City  
WAUKEGAN

State Zip Code  
IL 60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-HO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.70

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902210**

Amount of Each Receipt this Period

31.97

Full Name (Last, First, Middle Initial)

**C. THOMAS R NORTON**

Mailing Address 1423 PIONEER COURT

City  
WAUKEGAN

State Zip Code  
IL 60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-HO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.67

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932666**

Amount of Each Receipt this Period

31.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

95.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.51

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902108**

Amount of Each Receipt this Period

21.69

Full Name (Last, First, Middle Initial)

**B. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.20

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932565**

Amount of Each Receipt this Period

21.69

Full Name (Last, First, Middle Initial)

**C. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.80

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847619**

Amount of Each Receipt this Period

27.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City  
NAPERVILLE

State Zip Code  
IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.27

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902035**

Amount of Each Receipt this Period

27.47

Full Name (Last, First, Middle Initial)

**B. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City  
NAPERVILLE

State Zip Code  
IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.74

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932492**

Amount of Each Receipt this Period

27.47

Full Name (Last, First, Middle Initial)

**C. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City  
HOFFMAN ESTATES

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Prod Ops Sr State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.39

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847775**

Amount of Each Receipt this Period

46.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

101.78

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code  
 HOFFMAN ESTATES IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Prod Ops Sr State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902190**

Amount of Each Receipt this Period

46.84

Full Name (Last, First, Middle Initial)

## **B. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City State Zip Code  
 HOFFMAN ESTATES IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Prod Ops Sr State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932647**

Amount of Each Receipt this Period

46.84

Full Name (Last, First, Middle Initial)

## **C. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847681**

Amount of Each Receipt this Period

41.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

134.75

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902097

Amount of Each Receipt this Period

41.07

Full Name (Last, First, Middle Initial)

B. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932554

Amount of Each Receipt this Period

41.07

Full Name (Last, First, Middle Initial)

C. PAMELA J OVERTON

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847674

Amount of Each Receipt this Period

49.30

SUBTOTAL of Receipts This Page (optional)..... ►

131.44

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.60

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902090**

Amount of Each Receipt this Period

49.30

Full Name (Last, First, Middle Initial)

**B. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932547**

Amount of Each Receipt this Period

49.30

Full Name (Last, First, Middle Initial)

**C. DEAN T PAPPAS**

Mailing Address 3406 VICEROY COURT

City State Zip Code  
EDGEWATER MD 21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.46

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847648**

Amount of Each Receipt this Period

50.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

148.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DEAN T PAPPAS**

Mailing Address 3406 VICEROY COURT

City State Zip Code  
 EDGEWATER MD 21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902064**

Amount of Each Receipt this Period

50.25

Full Name (Last, First, Middle Initial)

## **B. DEAN T PAPPAS**

Mailing Address 3406 VICEROY COURT

City State Zip Code  
 EDGEWATER MD 21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.96

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932521**

Amount of Each Receipt this Period

50.25

Full Name (Last, First, Middle Initial)

## **C. MAYUR M PATEL**

Mailing Address 742 E PARKVIEW CT

City State Zip Code  
 ROSELLE IL 60172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847726**

Amount of Each Receipt this Period

33.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MAYUR M PATEL**

Mailing Address 742 E PARKVIEW CT

City  
ROSELLE

State Zip Code  
IL 60172

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.50

Date of Receipt

MM / DD / YYYY  
05 / 17 / 2013

**Transaction ID : A2013-2902142**

Amount of Each Receipt this Period

33.15

Full Name (Last, First, Middle Initial)

**B. MAYUR M PATEL**

Mailing Address 742 E PARKVIEW CT

City  
ROSELLE

State Zip Code  
IL 60172

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.65

Date of Receipt

MM / DD / YYYY  
05 / 31 / 2013

**Transaction ID : A2013-2932599**

Amount of Each Receipt this Period

33.15

Full Name (Last, First, Middle Initial)

**C. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.08

Date of Receipt

MM / DD / YYYY  
05 / 03 / 2013

**Transaction ID : A2013-847797**

Amount of Each Receipt this Period

44.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.80

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City State Zip Code  
 GLENVIEW IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902212

Amount of Each Receipt this Period

44.50

Full Name (Last, First, Middle Initial)

**B. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City State Zip Code  
 GLENVIEW IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.08

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932668

Amount of Each Receipt this Period

44.50

Full Name (Last, First, Middle Initial)

**C. NANCY A PERRY**

Mailing Address 3575 CALDERWOOD DR

City State Zip Code  
 ROCKFORD IL 61114

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902188

Amount of Each Receipt this Period

21.43

SUBTOTAL of Receipts This Page (optional)..... ►

110.43

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. NANCY A PERRY**

Mailing Address 3575 CALDERWOOD DR

City State Zip Code  
 ROCKFORD IL 61114

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932645

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

**B. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.11

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847898

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

**C. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902314

Amount of Each Receipt this Period

34.60

SUBTOTAL of Receipts This Page (optional)..... ►

90.63

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City  
NAPERVILLE

State Zip Code  
IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.31

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932769**

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

**B. CHETAN S PHADNIS**

Mailing Address 1315 CRESTWOOD DRIVE

City  
NORTHBROOK

State Zip Code  
IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Infrastructure Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2013

**Transaction ID : A2013-2915697**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. SAMUEL H PILCH**

Mailing Address 4519 HICKORY COURT

City  
LONG GROVE

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
GSVP-FSS-Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932460**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1534.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City  
CHICAGO

State Zip Code  
IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.22

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847697**

Amount of Each Receipt this Period

40.62

Full Name (Last, First, Middle Initial)

**B. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City  
CHICAGO

State Zip Code  
IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.84

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902113**

Amount of Each Receipt this Period

40.62

Full Name (Last, First, Middle Initial)

**C. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City  
CHICAGO

State Zip Code  
IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.46

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932570**

Amount of Each Receipt this Period

40.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

121.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Territorial SVP W

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.01

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847609**

Amount of Each Receipt this Period

60.58

Full Name (Last, First, Middle Initial)

**B. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Territorial SVP W

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.59

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902025**

Amount of Each Receipt this Period

60.58

Full Name (Last, First, Middle Initial)

**C. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City

Gainesville

State

VA

Zip Code

20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Territorial SVP W

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.17

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932482**

Amount of Each Receipt this Period

60.58

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

181.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.63

Date of Receipt

05 / 03 / 2013

Transaction ID : A2013-847799

Amount of Each Receipt this Period

26.64

Full Name (Last, First, Middle Initial)

**B. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.27

Date of Receipt

05 / 17 / 2013

Transaction ID : A2013-2902214

Amount of Each Receipt this Period

26.64

Full Name (Last, First, Middle Initial)

**C. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.91

Date of Receipt

05 / 31 / 2013

Transaction ID : A2013-2932670

Amount of Each Receipt this Period

26.64

**SUBTOTAL** of Receipts This Page (optional)..... ►

79.92

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. JORGE A QUEZADA**

Mailing Address 1407 W. GROVE ST

City State Zip Code  
 ARLINGTON HGTS IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Inclusive Diversity-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847887

Amount of Each Receipt this Period

37.80

Full Name (Last, First, Middle Initial)

**B. JORGE A QUEZADA**

Mailing Address 1407 W. GROVE ST

City State Zip Code  
 ARLINGTON HGTS IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Inclusive Diversity-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 17 2013

Transaction ID : A2013-2902303

Amount of Each Receipt this Period

37.80

Full Name (Last, First, Middle Initial)

**C. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code  
 ARLINGTON HEIGH IL 60005

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 03 2013

Transaction ID : A2013-847824

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.60

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code  
 ARLINGTON HEIGH IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902239**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code  
 ARLINGTON HEIGH IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932695**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. KEVIN P RICE**

Mailing Address 618 Burdick St.

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.57

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847734**

Amount of Each Receipt this Period

41.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

131.33

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN P RICE**

Mailing Address 618 Burdick St.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.90

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902149**

Amount of Each Receipt this Period

41.33

Full Name (Last, First, Middle Initial)

## **B. KEVIN P RICE**

Mailing Address 618 Burdick St.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.23

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932606**

Amount of Each Receipt this Period

41.33

Full Name (Last, First, Middle Initial)

## **C. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City  
OAK LAWN

State Zip Code  
IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.66

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847738**

Amount of Each Receipt this Period

59.01

**SUBTOTAL** of Receipts This Page (optional)..... ►

141.67

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City State Zip Code  
OAK LAWN IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.67

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902153**

Amount of Each Receipt this Period

59.01

Full Name (Last, First, Middle Initial)

## **B. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City State Zip Code  
OAK LAWN IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.68

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932610**

Amount of Each Receipt this Period

59.01

Full Name (Last, First, Middle Initial)

## **C. ROGER S ROBINSON**

Mailing Address 2529 Rolling Oaks Drive

City State Zip Code  
Palm Harbor FL 34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.02

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847668**

Amount of Each Receipt this Period

25.60

**SUBTOTAL** of Receipts This Page (optional)..... ►

143.62

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROGER S ROBINSON**

Mailing Address 2529 Rolling Oaks Drive

City	State	Zip Code
Palm Harbor	FL	34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

**Transaction ID : A2013-2902084**

Amount of Each Receipt this Period

25.60

Full Name (Last, First, Middle Initial)

**B. ROGER S ROBINSON**

Mailing Address 2529 Rolling Oaks Drive

City	State	Zip Code
Palm Harbor	FL	34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

**Transaction ID : A2013-2932541**

Amount of Each Receipt this Period

25.60

Full Name (Last, First, Middle Initial)

**C. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-847695**

Amount of Each Receipt this Period

44.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.06

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City  
RIVER FOREST

State Zip Code  
IL 60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.63

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902111**

Amount of Each Receipt this Period

44.86

Full Name (Last, First, Middle Initial)

**B. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City  
RIVER FOREST

State Zip Code  
IL 60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.49

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932568**

Amount of Each Receipt this Period

44.86

Full Name (Last, First, Middle Initial)

**C. ANDREW R ROMERO**

Mailing Address 105 BENETO CT

City  
FOLSOM

State Zip Code  
CA 95630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.39

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932744**

Amount of Each Receipt this Period

18.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

108.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. James B Rosseau**

Mailing Address 10 N. Sycamore Avenue

City State Zip Code  
Aldan PA 19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Affinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847918**

Amount of Each Receipt this Period

62.40

Full Name (Last, First, Middle Initial)

**B. James B Rosseau**

Mailing Address 10 N. Sycamore Avenue

City State Zip Code  
Aldan PA 19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Affinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.20

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902334**

Amount of Each Receipt this Period

62.40

Full Name (Last, First, Middle Initial)

**C. James B Rosseau**

Mailing Address 10 N. Sycamore Avenue

City State Zip Code  
Aldan PA 19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Affinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.60

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932789**

Amount of Each Receipt this Period

62.40

**SUBTOTAL** of Receipts This Page (optional)..... ►

187.20

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
 DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.98

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847774**

Amount of Each Receipt this Period

42.28

Full Name (Last, First, Middle Initial)

**B. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
 DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.26

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902189**

Amount of Each Receipt this Period

42.28

Full Name (Last, First, Middle Initial)

**C. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
 DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.54

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932646**

Amount of Each Receipt this Period

42.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

126.84

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DOREEN M RYAN**

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

07701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.02

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847632**

Amount of Each Receipt this Period

23.45

Full Name (Last, First, Middle Initial)

**B. DOREEN M RYAN**

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

07701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.47

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902048**

Amount of Each Receipt this Period

23.45

Full Name (Last, First, Middle Initial)

**C. DOREEN M RYAN**

Mailing Address 17 ALSTON COURT

City

RED BANK

State

NJ

Zip Code

07701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.92

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932505**

Amount of Each Receipt this Period

23.45

**SUBTOTAL** of Receipts This Page (optional)..... ►

70.35

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 03 2013

Transaction ID : A2013-847693

Amount of Each Receipt this Period

44.70

Full Name (Last, First, Middle Initial)

**B. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 17 2013

Transaction ID : A2013-2902109

Amount of Each Receipt this Period

44.70

Full Name (Last, First, Middle Initial)

**C. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 31 2013

Transaction ID : A2013-2932566

Amount of Each Receipt this Period

44.70

SUBTOTAL of Receipts This Page (optional)..... ►

134.10

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.94

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847911**

Amount of Each Receipt this Period

56.08

Full Name (Last, First, Middle Initial)

**B. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.32

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902327**

Amount of Each Receipt this Period

55.38

Full Name (Last, First, Middle Initial)

**C. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.70

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932782**

Amount of Each Receipt this Period

55.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

166.84

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A SCARDINA**

Mailing Address 51 SOUTH ROYAL OAK

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.47

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847680**

Amount of Each Receipt this Period

29.94

Full Name (Last, First, Middle Initial)

**B. MICHAEL A SCARDINA**

Mailing Address 51 SOUTH ROYAL OAK

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.41

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902096**

Amount of Each Receipt this Period

29.94

Full Name (Last, First, Middle Initial)

**C. MICHAEL A SCARDINA**

Mailing Address 51 SOUTH ROYAL OAK

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-ATO-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.35

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932553**

Amount of Each Receipt this Period

29.94

**SUBTOTAL** of Receipts This Page (optional)..... ►

89.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.09

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847778

Amount of Each Receipt this Period

36.54

Full Name (Last, First, Middle Initial)

B. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902193

Amount of Each Receipt this Period

36.54

Full Name (Last, First, Middle Initial)

C. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932650

Amount of Each Receipt this Period

36.54

SUBTOTAL of Receipts This Page (optional)..... ►

109.62

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847635

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

B. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902051

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

C. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932508

Amount of Each Receipt this Period

58.91

SUBTOTAL of Receipts This Page (optional)..... ►

176.73

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.16

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902273**

Amount of Each Receipt this Period

21.11

Full Name (Last, First, Middle Initial)

**B. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.27

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932729**

Amount of Each Receipt this Period

21.11

Full Name (Last, First, Middle Initial)

**C. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City

CHICAGO

State

IL

Zip Code

60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.80

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847737**

Amount of Each Receipt this Period

54.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.42

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902152**

Amount of Each Receipt this Period

54.20

Full Name (Last, First, Middle Initial)

**B. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.20

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932609**

Amount of Each Receipt this Period

54.20

Full Name (Last, First, Middle Initial)

**C. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City State Zip Code  
 Phoenixville PA 19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847832**

Amount of Each Receipt this Period

53.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

161.60

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.61

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902247**

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

**B. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City

Phoenixville

State

PA

Zip Code

19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.81

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932703**

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

**C. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.87

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847768**

Amount of Each Receipt this Period

48.13

**SUBTOTAL** of Receipts This Page (optional)..... ►

154.53

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902183**

Amount of Each Receipt this Period

48.13

Full Name (Last, First, Middle Initial)

**B. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.13

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932640**

Amount of Each Receipt this Period

48.13

Full Name (Last, First, Middle Initial)

**C. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City State Zip Code  
 WHEATON IL 60189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1246.14

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847744**

Amount of Each Receipt this Period

138.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

234.72

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City  
WHEATON

State Zip Code  
IL 60189

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1384.60

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902159**

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

## **B. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City  
WHEATON

State Zip Code  
IL 60189

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1523.06

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932616**

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

## **C. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City  
HIGHLAND PARK

State Zip Code  
IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.31

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902105**

Amount of Each Receipt this Period

21.52

**SUBTOTAL** of Receipts This Page (optional)..... ►

298.44

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City State Zip Code  
HIGHLAND PARK IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.83

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932562**

Amount of Each Receipt this Period

21.52

Full Name (Last, First, Middle Initial)

**B. ADAM R SHORES**

Mailing Address 157 Station Park Circle

City State Zip Code  
Grayslake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.27

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847893**

Amount of Each Receipt this Period

27.92

Full Name (Last, First, Middle Initial)

**C. ADAM R SHORES**

Mailing Address 157 Station Park Circle

City State Zip Code  
Grayslake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.19

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902309**

Amount of Each Receipt this Period

27.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ADAM R SHORES**

Mailing Address 157 Station Park Circle

City State Zip Code  
Grayslake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.11

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932764**

Amount of Each Receipt this Period

27.92

Full Name (Last, First, Middle Initial)

## **B. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.32

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847814**

Amount of Each Receipt this Period

23.71

Full Name (Last, First, Middle Initial)

## **C. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.03

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902229**

Amount of Each Receipt this Period

23.71

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
 FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932685**

Amount of Each Receipt this Period

23.71

Full Name (Last, First, Middle Initial)

## **B. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City State Zip Code  
 St Petersburg FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847626**

Amount of Each Receipt this Period

35.65

Full Name (Last, First, Middle Initial)

## **C. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City State Zip Code  
 St Petersburg FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.82

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902042**

Amount of Each Receipt this Period

35.65

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City State Zip Code  
 St Petersburg FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.47

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932499**

Amount of Each Receipt this Period

35.65

Full Name (Last, First, Middle Initial)

**B. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City State Zip Code  
 BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.77

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847869**

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

**C. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City State Zip Code  
 BARRINGTON IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.61

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902285**

Amount of Each Receipt this Period

41.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.45

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932741**

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

**B. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.79

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847760**

Amount of Each Receipt this Period

45.63

Full Name (Last, First, Middle Initial)

**C. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.42

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902175**

Amount of Each Receipt this Period

45.63

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.10

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.05

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932632**

Amount of Each Receipt this Period

45.63

Full Name (Last, First, Middle Initial)

**B. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.34

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847835**

Amount of Each Receipt this Period

36.98

Full Name (Last, First, Middle Initial)

**C. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.32

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902250**

Amount of Each Receipt this Period

36.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

119.59

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 176 OF 229  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

**Transaction ID : A2013-2932706**

Amount of Each Receipt this Period

36.98

Full Name (Last, First, Middle Initial)

**B. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

**Transaction ID : A2013-847844**

Amount of Each Receipt this Period

23.10

Full Name (Last, First, Middle Initial)

**C. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

**Transaction ID : A2013-2902259**

Amount of Each Receipt this Period

23.10

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.18

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.79

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932715**

Amount of Each Receipt this Period

23.10

Full Name (Last, First, Middle Initial)

**B. RANDALL D SNITTJER**

Mailing Address 11423 E. Blue Sky Drive

City  
Scottsdale

State Zip Code  
AZ 85262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.30

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847863**

Amount of Each Receipt this Period

36.94

Full Name (Last, First, Middle Initial)

**C. RANDALL D SNITTJER**

Mailing Address 11423 E. Blue Sky Drive

City  
Scottsdale

State Zip Code  
AZ 85262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.24

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902278**

Amount of Each Receipt this Period

36.94

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.98

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 178 OF 229

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RANDALL D SNITTJER**

Mailing Address 11423 E. Blue Sky Drive

City State Zip Code  
 Scottsdale AZ 85262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.18

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932734**

Amount of Each Receipt this Period

36.94

Full Name (Last, First, Middle Initial)

**B. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.67

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847826**

Amount of Each Receipt this Period

91.19

Full Name (Last, First, Middle Initial)

**C. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.86

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902241**

Amount of Each Receipt this Period

91.19

**SUBTOTAL** of Receipts This Page (optional)..... ►

219.32

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City  
KILDEER

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

993.05

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932697**

Amount of Each Receipt this Period

91.19

Full Name (Last, First, Middle Initial)

**B. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.81

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847793**

Amount of Each Receipt this Period

38.67

Full Name (Last, First, Middle Initial)

**C. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.48

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902208**

Amount of Each Receipt this Period

38.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

168.53

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEWState Zip Code  
IL 60026FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.15

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932664

Amount of Each Receipt this Period

38.67

Full Name (Last, First, Middle Initial)

**B. EDWIN M SPECHT**

Mailing Address 740 AMBRIA DRIVE

City  
MUNDELEINState Zip Code  
IL 60060FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
HR-Sales Comp-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.98

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847646

Amount of Each Receipt this Period

40.42

Full Name (Last, First, Middle Initial)

**C. EDWIN M SPECHT**

Mailing Address 740 AMBRIA DRIVE

City  
MUNDELEINState Zip Code  
IL 60060FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance CompanyOccupation  
HR-Sales Comp-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.40

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902062

Amount of Each Receipt this Period

40.42

SUBTOTAL of Receipts This Page (optional)..... ►

119.51

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. EDWIN M SPECHT**

Mailing Address 740 AMBRIA DRIVE

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Sales Comp-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			31			2013			

Transaction ID : A2013-2932519

Amount of Each Receipt this Period

40.42

Full Name (Last, First, Middle Initial)

**B. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Transaction ID : A2013-847811

Amount of Each Receipt this Period

28.88

Full Name (Last, First, Middle Initial)

**C. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			17			2013			

Transaction ID : A2013-2902226

Amount of Each Receipt this Period

28.88

SUBTOTAL of Receipts This Page (optional)..... ►

98.18

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5	/	3	1	/	2	0	1	3		

Transaction ID : A2013-2932682

Amount of Each Receipt this Period

28.88

Full Name (Last, First, Middle Initial)

**B. JAMES G SPORLEDER**

Mailing Address 20 LAKESIDE LANE

City	State	Zip Code
N. BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Specialty Operatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5	/	0	3	/	2	0	1	3		

Transaction ID : A2013-847788

Amount of Each Receipt this Period

29.27

Full Name (Last, First, Middle Initial)

**C. JAMES G SPORLEDER**

Mailing Address 20 LAKESIDE LANE

City	State	Zip Code
N. BARRINGTON	IL	60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Specialty Operatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5	/	1	7	/	2	0	1	3		

Transaction ID : A2013-2902203

Amount of Each Receipt this Period

29.27

SUBTOTAL of Receipts This Page (optional)..... ►

87.42

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES G SPORLEDER**

Mailing Address 20 LAKESIDE LANE

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Specialty Operatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.04

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932660**

Amount of Each Receipt this Period

29.27

Full Name (Last, First, Middle Initial)

**B. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.84

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847684**

Amount of Each Receipt this Period

60.48

Full Name (Last, First, Middle Initial)

**C. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.32

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902100**

Amount of Each Receipt this Period

60.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.23

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932557**

Amount of Each Receipt this Period

60.48

Full Name (Last, First, Middle Initial)

**B. EMORY D STEPHENS Jr.**

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code  
CHICAGO IL 60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.40

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847662**

Amount of Each Receipt this Period

44.70

Full Name (Last, First, Middle Initial)

**C. EMORY D STEPHENS Jr.**

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code  
CHICAGO IL 60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.10

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902078**

Amount of Each Receipt this Period

44.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

149.88

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EMORY D STEPHENS Jr.**

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code  
 CHICAGO IL 60640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932535**

Amount of Each Receipt this Period

44.70

Full Name (Last, First, Middle Initial)

**B. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
 ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.06

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847670**

Amount of Each Receipt this Period

43.77

Full Name (Last, First, Middle Initial)

**C. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
 ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902086**

Amount of Each Receipt this Period

43.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

132.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
 ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932543**

Amount of Each Receipt this Period

43.77

Full Name (Last, First, Middle Initial)

## **B. MYRON E STOUFFER**

Mailing Address P.O. Box 533

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847666**

Amount of Each Receipt this Period

30.78

Full Name (Last, First, Middle Initial)

## **C. MYRON E STOUFFER**

Mailing Address P.O. Box 533

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902082**

Amount of Each Receipt this Period

30.78

**SUBTOTAL** of Receipts This Page (optional)..... ►

105.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MYRON E STOUFFER**

Mailing Address P.O. Box 533

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.75

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932539**

Amount of Each Receipt this Period

30.78

Full Name (Last, First, Middle Initial)

## **B. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.67

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847700**

Amount of Each Receipt this Period

62.92

Full Name (Last, First, Middle Initial)

## **C. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.59

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902116**

Amount of Each Receipt this Period

62.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

156.62

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.51

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932573**

Amount of Each Receipt this Period

62.92

Full Name (Last, First, Middle Initial)

**B. BENJAMIN A TARVER**

Mailing Address 2495 EMERALD LANE

City State Zip Code  
LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.45

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847625**

Amount of Each Receipt this Period

25.33

Full Name (Last, First, Middle Initial)

**C. BENJAMIN A TARVER**

Mailing Address 2495 EMERALD LANE

City State Zip Code  
LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.78

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902041**

Amount of Each Receipt this Period

25.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

113.58

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BENJAMIN A TARVER**

Mailing Address 2495 EMERALD LANE

City State Zip Code  
LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.11

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932498**

Amount of Each Receipt this Period

25.33

Full Name (Last, First, Middle Initial)

## **B. SEAN D THAKUR**

Mailing Address 701 N. Chruch St #1

City State Zip Code  
Charlotte NC 28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932718**

Amount of Each Receipt this Period

19.32

Full Name (Last, First, Middle Initial)

## **C. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City State Zip Code  
KENILWORTH IL 60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.78

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847897**

Amount of Each Receipt this Period

24.35

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.13

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902313**

Amount of Each Receipt this Period

24.35

Full Name (Last, First, Middle Initial)

**B. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.48

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932768**

Amount of Each Receipt this Period

24.35

Full Name (Last, First, Middle Initial)

**C. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City

CHICAGO

State

IL

Zip Code

60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.11

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847727**

Amount of Each Receipt this Period

33.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.94

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City  
CHICAGO

State Zip Code  
IL 60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.35

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902143

Amount of Each Receipt this Period

33.24

Full Name (Last, First, Middle Initial)

**B. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City  
CHICAGO

State Zip Code  
IL 60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.59

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932600

Amount of Each Receipt this Period

33.24

Full Name (Last, First, Middle Initial)

**C. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City  
CHICAGO

State Zip Code  
IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.59

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847859

Amount of Each Receipt this Period

31.71

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.19

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City State Zip Code  
 CHICAGO IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902274**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**B. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City State Zip Code  
 CHICAGO IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.01

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932730**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**C. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City State Zip Code  
 Castle Rock CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.46

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847660**

Amount of Each Receipt this Period

50.68

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.10



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City State Zip Code  
Castle Rock CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.14

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902076**

Amount of Each Receipt this Period

50.68

Full Name (Last, First, Middle Initial)

**B. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City State Zip Code  
Castle Rock CO 80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.82

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932533**

Amount of Each Receipt this Period

50.68

Full Name (Last, First, Middle Initial)

**C. ROBERT E TRANSON**

Mailing Address 2644 N DOUGLAS

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Life Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.01

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847735**

Amount of Each Receipt this Period

31.49

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT E TRANSON**

Mailing Address 2644 N DOUGLAS

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Life Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902150**

Amount of Each Receipt this Period

31.49

Full Name (Last, First, Middle Initial)

**B. ROBERT E TRANSON**

Mailing Address 2644 N DOUGLAS

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Life Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.99

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932607**

Amount of Each Receipt this Period

31.49

Full Name (Last, First, Middle Initial)

**C. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code  
LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.61

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847843**

Amount of Each Receipt this Period

54.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

117.49

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.12

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902258**

Amount of Each Receipt this Period

54.51

Full Name (Last, First, Middle Initial)

**B. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.63

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932714**

Amount of Each Receipt this Period

54.51

Full Name (Last, First, Middle Initial)

**C. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City

ENGLEWOOD

State

CO

Zip Code

80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.71

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902028**

Amount of Each Receipt this Period

21.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

130.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City  
ENGLEWOOD

State Zip Code  
CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.41

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932485**

Amount of Each Receipt this Period

21.70

Full Name (Last, First, Middle Initial)

**B. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.71

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847741**

Amount of Each Receipt this Period

63.97

Full Name (Last, First, Middle Initial)

**C. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.68

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902156**

Amount of Each Receipt this Period

63.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.65

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932613**

Amount of Each Receipt this Period

63.97

Full Name (Last, First, Middle Initial)

**B. WILLIAM P VANDERBORG**

Mailing Address 21621 W Wilmar Ave

City  
Grayslake

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.62

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847699**

Amount of Each Receipt this Period

34.91

Full Name (Last, First, Middle Initial)

**C. WILLIAM P VANDERBORG**

Mailing Address 21621 W Wilmar Ave

City  
Grayslake

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.53

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902115**

Amount of Each Receipt this Period

34.91

**SUBTOTAL** of Receipts This Page (optional)..... ►

133.79

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM P VANDERBORG**

Mailing Address 21621 W Wilmar Ave

City State Zip Code  
Grayslake IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.44

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932572**

Amount of Each Receipt this Period

34.91

Full Name (Last, First, Middle Initial)

**B. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Customer Exp & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.15

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847868**

Amount of Each Receipt this Period

70.38

Full Name (Last, First, Middle Initial)

**C. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Customer Exp & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.53

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902284**

Amount of Each Receipt this Period

70.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Customer Exp & Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932740**

Amount of Each Receipt this Period

70.38

Full Name (Last, First, Middle Initial)

**B. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code  
 BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847694**

Amount of Each Receipt this Period

43.89

Full Name (Last, First, Middle Initial)

**C. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code  
 BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902110**

Amount of Each Receipt this Period

43.89

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 200 OF 229  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City  
BERWYNState  
ILZip Code  
60402FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	3		

**Transaction ID : A2013-2932567**

Amount of Each Receipt this Period

43.89

Full Name (Last, First, Middle Initial)

**B. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTHState  
ILZip Code  
60083FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	3		2	0	1	3		

**Transaction ID : A2013-847621**

Amount of Each Receipt this Period

140.38

Full Name (Last, First, Middle Initial)

**C. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTHState  
ILZip Code  
60083FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	7		2	0	1	3		

**Transaction ID : A2013-2902037**

Amount of Each Receipt this Period

140.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

324.65

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTH

State Zip Code  
IL 60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1528.97

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932494**

Amount of Each Receipt this Period

140.38

Full Name (Last, First, Middle Initial)

**B. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.74

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902213**

Amount of Each Receipt this Period

20.53

Full Name (Last, First, Middle Initial)

**C. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.27

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932669**

Amount of Each Receipt this Period

20.53

**SUBTOTAL** of Receipts This Page (optional)..... ►

181.44

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness &amp; Direc

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

624.06

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847907

Amount of Each Receipt this Period

70.28

Full Name (Last, First, Middle Initial)

**B. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness &amp; Direc

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

694.34

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902323

Amount of Each Receipt this Period

70.28

Full Name (Last, First, Middle Initial)

**C. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City

Wheaton

State

IL

Zip Code

60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-eBusiness &amp; Direc

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

764.62

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932778

Amount of Each Receipt this Period

70.28

SUBTOTAL of Receipts This Page (optional)..... ►

210.84

TOTAL This Period (last page this line number only)..... ►

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JONATHAN J WELLS**

Mailing Address 5394 W RIVER BEND DRIVE

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Bank Cash Management Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.45

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847861**

Amount of Each Receipt this Period

36.97

Full Name (Last, First, Middle Initial)

**B. JONATHAN J WELLS**

Mailing Address 5394 W RIVER BEND DRIVE

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Bank Cash Management Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.42

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902276**

Amount of Each Receipt this Period

36.97

Full Name (Last, First, Middle Initial)

**C. JONATHAN J WELLS**

Mailing Address 5394 W RIVER BEND DRIVE

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Bank Cash Management Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.39

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932732**

Amount of Each Receipt this Period

36.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.63

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847850**

Amount of Each Receipt this Period

36.43

Full Name (Last, First, Middle Initial)

**B. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.06

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902265**

Amount of Each Receipt this Period

36.43

Full Name (Last, First, Middle Initial)

**C. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.49

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932721**

Amount of Each Receipt this Period

36.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

109.29

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.19

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847624**

Amount of Each Receipt this Period

23.81

Full Name (Last, First, Middle Initial)

**B. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902040**

Amount of Each Receipt this Period

23.81

Full Name (Last, First, Middle Initial)

**C. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.81

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932497**

Amount of Each Receipt this Period

23.81

**SUBTOTAL** of Receipts This Page (optional)..... ►

71.43

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT N WHOLF**

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Emerging Business Operati

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
208.08

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847683**

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

**B. ROBERT N WHOLF**

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Emerging Business Operati

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
231.44

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902099**

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

**C. ROBERT N WHOLF**

Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Emerging Business Operati

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼  
254.80

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932556**

Amount of Each Receipt this Period

23.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Product Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.04

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847709**

Amount of Each Receipt this Period

42.69

Full Name (Last, First, Middle Initial)

**B. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Product Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.73

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902125**

Amount of Each Receipt this Period

42.69

Full Name (Last, First, Middle Initial)

**C. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Product Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.42

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932582**

Amount of Each Receipt this Period

42.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

128.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 208 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.48

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847663**

Amount of Each Receipt this Period

26.50

Full Name (Last, First, Middle Initial)

**B. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.98

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902079**

Amount of Each Receipt this Period

26.50

Full Name (Last, First, Middle Initial)

**C. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.48

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932536**

Amount of Each Receipt this Period

26.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

79.50



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 209 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847728**

Amount of Each Receipt this Period

44.85

Full Name (Last, First, Middle Initial)

**B. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.65

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902144**

Amount of Each Receipt this Period

44.85

Full Name (Last, First, Middle Initial)

**C. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932601**

Amount of Each Receipt this Period

44.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

134.55

**TOTAL** This Period (last page this line number only)..... ►

X	11a		11b		11c		12		
	13		14		15		16		17

Allstate Insurance Company PAC

FEC Schedule A (Form 3X) Rev. 02/2003

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City State Zip Code  
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.69

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902308**

Amount of Each Receipt this Period

21.47

Full Name (Last, First, Middle Initial)

**B. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City State Zip Code  
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.16

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932763**

Amount of Each Receipt this Period

21.47

Full Name (Last, First, Middle Initial)

**C. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PC-Pres Auto Home &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1531.75

Date of Receipt

M M / D D / Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847913**

Amount of Each Receipt this Period

173.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

216.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 212 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PC-Pres Auto Home &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1704.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902329**

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

**B. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PC-Pres Auto Home &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.98

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932784**

Amount of Each Receipt this Period

346.15

Full Name (Last, First, Middle Initial)

**C. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City State Zip Code  
 JOHNSBURG IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902207**

Amount of Each Receipt this Period

20.81

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

540.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City State Zip Code  
 JOHNSBURG IL 60051

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

Transaction ID : A2013-2932663

Amount of Each Receipt this Period

20.81

Full Name (Last, First, Middle Initial)

**B. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.93

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

Transaction ID : A2013-847789

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.43

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

Transaction ID : A2013-2902204

Amount of Each Receipt this Period

22.50

SUBTOTAL of Receipts This Page (optional)..... ►

65.81

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code  
 ARLINGTON HTS. IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.93

Date of Receipt

MM / DD / YYYY  
 05 / 31 / 2013

**Transaction ID : A2013-2932661**

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

## **B. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City State Zip Code  
 Ivanhoe IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.58

Date of Receipt

MM / DD / YYYY  
 05 / 03 / 2013

**Transaction ID : A2013-847851**

Amount of Each Receipt this Period

40.70

Full Name (Last, First, Middle Initial)

## **C. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City State Zip Code  
 Ivanhoe IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.28

Date of Receipt

MM / DD / YYYY  
 05 / 17 / 2013

**Transaction ID : A2013-2902266**

Amount of Each Receipt this Period

40.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.98

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932722**

Amount of Each Receipt this Period

40.70

Full Name (Last, First, Middle Initial)

**B. DAVID E WOOLWINE**

Mailing Address 1608 W. ROSEHILL DR

City

CHICAGO

State

IL

Zip Code

60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.28

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932527**

Amount of Each Receipt this Period

40.70

Full Name (Last, First, Middle Initial)

**C. DONALD F WYATT JR Jr.**

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.90

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847712**

Amount of Each Receipt this Period

38.10

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DONALD F WYATT JR Jr.

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

Transaction ID : A2013-2902128

Amount of Each Receipt this Period

38.10

Full Name (Last, First, Middle Initial)

B. DONALD F WYATT JR Jr.

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

419.10

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

Transaction ID : A2013-2932585

Amount of Each Receipt this Period

38.10

Full Name (Last, First, Middle Initial)

C. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

549.45

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

Transaction ID : A2013-847759

Amount of Each Receipt this Period

62.31

SUBTOTAL of Receipts This Page (optional)..... ►

138.51

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

611.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902174

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

**B. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932631

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

**C. LORI J YELVINGTON**

Mailing Address 1531 N HIGHLAND AVE

City	State	Zip Code
ARLINGTON HGTS.	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Regional Chief Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2013

Transaction ID : A2013-847765

Amount of Each Receipt this Period

60.99

SUBTOTAL of Receipts This Page (optional)..... ►

185.61

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LORI J YELVINGTON**

Mailing Address 1531 N HIGHLAND AVE

City	State	Zip Code
ARLINGTON HGTS.	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Regional Chief Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902180

Amount of Each Receipt this Period

60.99

Full Name (Last, First, Middle Initial)

**B. LORI J YELVINGTON**

Mailing Address 1531 N HIGHLAND AVE

City	State	Zip Code
ARLINGTON HGTS.	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Regional Chief Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932637

Amount of Each Receipt this Period

60.99

Full Name (Last, First, Middle Initial)

**C. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902146

Amount of Each Receipt this Period

21.79

SUBTOTAL of Receipts This Page (optional)..... ►

143.77

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 OF 229

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City State Zip Code  
 BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 31 / 2013

**Transaction ID : A2013-2932603**

Amount of Each Receipt this Period

21.79

Full Name (Last, First, Middle Initial)

**B. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
 ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.54

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 03 / 2013

**Transaction ID : A2013-847756**

Amount of Each Receipt this Period

42.77

Full Name (Last, First, Middle Initial)

**C. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
 ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 17 / 2013

**Transaction ID : A2013-2902171**

Amount of Each Receipt this Period

42.77

**SUBTOTAL** of Receipts This Page (optional)..... ►

107.33

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 229

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932628

Amount of Each Receipt this Period

42.77

Full Name (Last, First, Middle Initial)

**B. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City	State	Zip Code
VILLA PARK	IL	60181

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2013

Transaction ID : A2013-2902222

Amount of Each Receipt this Period

21.16

Full Name (Last, First, Middle Initial)

**C. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City	State	Zip Code
VILLA PARK	IL	60181

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2013

Transaction ID : A2013-2932678

Amount of Each Receipt this Period

21.16

SUBTOTAL of Receipts This Page (optional)..... ►

85.09

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 229  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City  
AURORA

State Zip Code  
IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.09

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 03 / 2013

**Transaction ID : A2013-847830**

Amount of Each Receipt this Period

74.56

Full Name (Last, First, Middle Initial)

**B. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City  
AURORA

State Zip Code  
IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.65

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 17 / 2013

**Transaction ID : A2013-2902245**

Amount of Each Receipt this Period

74.56

Full Name (Last, First, Middle Initial)

**C. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City  
AURORA

State Zip Code  
IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.21

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2013

**Transaction ID : A2013-2932701**

Amount of Each Receipt this Period

74.56

**SUBTOTAL** of Receipts This Page (optional)..... ►

223.68

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 OF 229

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.49

Date of Receipt

05 / 03 / 2013

**Transaction ID : A2013-847871**

Amount of Each Receipt this Period

28.41

Full Name (Last, First, Middle Initial)

**B. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.90

Date of Receipt

05 / 17 / 2013

**Transaction ID : A2013-2902287**

Amount of Each Receipt this Period

28.41

Full Name (Last, First, Middle Initial)

**C. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.31

Date of Receipt

05 / 31 / 2013

**Transaction ID : A2013-2932743**

Amount of Each Receipt this Period

28.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

85.23

**TOTAL** This Period (last page this line number only)..... ►

30942.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 223 OF 229

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 346 West Carol Lane

City Elmhurst	State IL	Zip Code 60062
------------------	-------------	-------------------

Purpose of Disbursement  
May Bank Service Charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2013

**Transaction ID : B455964**

Amount of Each Disbursement this Period

84.67
-------

May Bank Service Charge

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

84.67

84.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 224 OF 229

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Cotton for Congress**

Mailing Address PO Box 379

City	State	Zip Code
Dardanelle	AR	72834

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tom Cotton**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454422**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Issa for Congress**

Mailing Address PO Box 368

City	State	Zip Code
Falls Church	VA	22040

Purpose of Disbursement  
Contribution

011

Candidate Name

**Darrell Issa**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 49

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454418**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Juan Vargas for Congress**

Mailing Address PO Box 636

City	State	Zip Code
Annandale	VA	22003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Juan Vargas**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 51

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454415**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 225 OF 229

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Bilirakis for Congress**

Mailing Address PO Box 606

City	State	Zip Code
Tarpon Springs	FL	34688

Purpose of Disbursement  
Contribution

Candidate Name

**Gus Bilirakis**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2013

**Transaction ID : B454479**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Schneider for Congress**

Mailing Address 3701 Porter Street NW

City	State	Zip Code
Washington	DC	20016

Purpose of Disbursement  
Contribution

Candidate Name

**Brad Schneider**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454417**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Volunteers for Shimkus**

Mailing Address 499 S. Capitol St. SE Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**John M Shimkus**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454416**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 226 OF 229

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Capuano for Congress**

Mailing Address 38 Ivy Street SE

City Washington	State DC	Zip Code 20003
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Purpose of Disbursement  
Contribution

Candidate Name

**Michael E Capuano**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2013

**Transaction ID : B454481**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. Dave Camp for Congress**

Mailing Address 20 F Street NW Suite 500

City Washington	State DC	Zip Code 20001
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Purpose of Disbursement  
Contribution

Candidate Name

**Dave Camp**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454420**

Amount of Each Disbursement this Period

2000.00
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Full Name (Last, First, Middle Initial)

**C. Sires for Congress**

Mailing Address 625 3rd St. NE Suite 2

City Washington	State DC	Zip Code 20002
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Purpose of Disbursement  
Contribution

Candidate Name

**Albio Sires MD**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454419**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Sherrod Brown**

Mailing Address 328 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sherrod Brown**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454421**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. The Reed Committee**

Mailing Address 328 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jack Reed**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: RI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454413**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Heartland Values PAC**

Mailing Address PO Box 505

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement  
Contribution

011

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: SD District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454412**

Amount of Each Disbursement this Period

1500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

Allstate Insurance Company PAC

1000.00

State: TX District: 32

Category/  
Type

State:  District:

Amount of Each Disbursement this Period

Category/  
Type

State:  District:

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Joe Scarnati**

Mailing Address P.O. Box 33

City	State	Zip Code
Youngsville	PA	16371

Purpose of Disbursement  
P-2016 State Senate 25 PA

011

Candidate Name

**Joseph B Scarnati III**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2013

**Transaction ID : B452895**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. Friends of Mike Turzai**

Mailing Address P.O. Box 721

City	State	Zip Code
Wexford	PA	15090

Purpose of Disbursement  
P-2014 State House 28 PA

011

Candidate Name

**Mike Turzai**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2013

**Transaction ID : B454411**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00